

# Vigilant Manufacturers Plan 1 - Ortho Group # 00075

# Delta Dental PPO™ Plan Benefit Summary

| Effective Date                      | October 1, 2022    |  |  |
|-------------------------------------|--------------------|--|--|
| Benefit Period                      | January – December |  |  |
| Benefit Period Maximum (Per Person) | \$1,000            |  |  |
| TMJ                                 | 50%                |  |  |
| Annual Maximum (Per Person)         | \$1,000            |  |  |
| Lifetime Maximum (Per Person)       | \$5,000            |  |  |
| Orthodontia – Adults & Children     | 50%                |  |  |
| Lifetime Maximum (Per Person)       | \$1,000            |  |  |

|                                   | Dental Network            |                  |                   |  |  |  |
|-----------------------------------|---------------------------|------------------|-------------------|--|--|--|
|                                   | Delta Dental              | Delta Dental     | Non-Participating |  |  |  |
|                                   | PPO <sup>sM</sup> Dentist | Premier® Dentist | Dentist           |  |  |  |
| В                                 | enefit Period Deductib    | e                |                   |  |  |  |
| Does Not Apply to Class I         | \$50/\$150                | \$50/\$150       | \$50/\$150        |  |  |  |
| (Per Person/Per Family)           |                           | ·                | <b>Ψ30/Ψ130</b>   |  |  |  |
| Class I – Diagnostic & Preventive |                           |                  |                   |  |  |  |
| Exams                             | 100%                      | 100%             | 100%              |  |  |  |
| Cleaning                          |                           |                  |                   |  |  |  |
| Fluoride                          |                           |                  |                   |  |  |  |
| X-Rays                            |                           |                  |                   |  |  |  |
| Sealants                          |                           |                  |                   |  |  |  |
|                                   | Class II – Restorative    |                  |                   |  |  |  |
| Fillings                          |                           | 80%              | 80%               |  |  |  |
| Endodontics (Root Canal)          | 90%                       |                  |                   |  |  |  |
| Periodontics                      |                           |                  |                   |  |  |  |
| Oral Surgery                      |                           |                  |                   |  |  |  |
| General Anesthesia/IV Sedation    |                           |                  |                   |  |  |  |
| Class III – Major                 |                           |                  |                   |  |  |  |
| Dentures                          | 50%                       | 50%              | 50%               |  |  |  |
| Partial Dentures                  |                           |                  |                   |  |  |  |
| Implants                          |                           |                  |                   |  |  |  |
| Bridges                           |                           |                  |                   |  |  |  |
| Crowns                            |                           |                  |                   |  |  |  |



This is a summary of benefits for comparison and isn't a contract. Once you're enrolled, you can get a benefits booklet that will provide all the details of your dental plan. Please feel free to call our customer service department or visit our website at **DeltaDentalWA.com** if you have any questions.

Keep in mind, you will likely experience the greatest savings when you see a Delta Dental PPO dentist.



# Get the most from your benefits!



# Create a MySmile® account

It gives you secure, 24/7 access to your ID card, benefits information, out-of-pocket cost estimates, and more! Our "Find your member ID" tool makes registration easy. Visit DeltaDentalWA.com to create your account.

#### Choose an in-network dentist

Your plan gives you access to the Delta Dental PPO<sup>sM</sup> network. Your benefits go farthest when you visit a Delta Dental PPO dentist which gives you the most bang for your buck.

If you see a NON-Delta Dental PPO dentist, you won't maximize your benefits. Your annual maximum won't go as far and you'll likely have greater out-of-pocket costs.

|   | Delta Dental PPO | Delta Dental Premier | Non-Delta Dental |
|---|------------------|----------------------|------------------|
| Your plan's network   | ✓                |                      |                  |
| Benefits go farthest which means least out-of-pocket costs  | ✓                |                      |                  |
| Files claims forms for you                                  | ✓                | ✓                    |                  |
| Comes with our quality management and cost protection       | ✓                | ✓                    |                  |
| No cost protection which means greatest out-of-pocket costs |                  |                      | ✓                |

# Find an in-network dentist near you:

- 1. Visit DeltaDentalWA.com
- 2. Click on 'Online Tools' and use our 'Find a Dentist' tool
- 3. Select 'Delta Dental PPO' to filter your search results



# Visit your dentist regularly

Your plan covers preventive care visits each year. Regular cleanings and check-ups are essential to keeping your smile healthy and preventing painful, expensive problems down the road.

### **Get out-of-pocket cost estimates**

Knowing your cost upfront helps you and your dentist plan treatments to maximize your benefits.

MySmile Cost Genie<sup>sM</sup> gives you instant, cost estimates. It's great for basic treatments like fillings. Simply sign in to MySmile account to get your personalized estimate.

When you need extensive treatment, like a crown, ask your dentist for a "Predetermination." You'll get a **Confirmation of Treatment and Cost** from us. It details your dentist's treatment plan, what your benefits cover, and how much you may owe your dentist for the treatment.





# Have a question?

Give us a call at 800.554.1907, Monday – Friday from 7am to 5pm, Pacific Time. We're happy to help.