

2019 Delta Dental PPO Plan Benefit Summary



Delta Dental of Oregon & Alaska

Preferred Option Plan BPB3X50

	In-network PPO provider	Out-of-network Premier provider	Out-of-network non-participating provider
Calendar year costs			
Calendar year maximum, per member		\$1,500	
Calendar year deductible, per member		\$50	
Calendar year maximum deductible, per family		\$150	
Class 1*			
Periodic examinations / x-rays	100%	90%	90%
Prophylaxis (cleanings) / periodontal maintenance	100%	90%	90%
Sealants	100%	90%	90%
Space maintainers	100%	90%	90%
Topical application of fluoride	100%	90%	90%
Class 2			
Restorative fillings	80%	70%	70%
Oral surgery (extractions & certain minor surgical procedures)	80%	70%	70%
Endodontics (treatment of teeth with diseased or damaged nerves)	80%	70%	70%
Periodontics (treatment of diseases of the gums and supporting structures of the teeth)	80%	70%	70%
Class 3			
Implants	50%	50%	50%
Crowns and other cast restorations	50%	50%	50%
Dentures and bridges (construction or repair of fixed bridges, partial, and complete dentures)	50%	50%	50%

* Deductible waived for preventive.

This is a benefit summary only. For a more detailed description of benefits, refer to your member handbook.

How to use this dental plan

For In-Network benefits, members select a Delta Dental PPO dentist from our directory which is on our website at www.modahealth.com. Each family member may choose a different dentist. If you receive care from a dental provider not in the Delta Dental PPO Network, Out-of-Network coverage levels apply.

When the member visits:

Delta Dental PPO Dentists:

Benefits are paid at the In Network benefit level. Members are held harmless from balance billing (will not be billed for the difference between the dentist's billed charge and the Delta Dental PPO fee).

Delta Dental Premier Dentist, Non PPO:

Benefits are paid at the Out of Network benefit level. Members are held harmless from balance billing (will not be billed for the difference between the dentist's billed charge and the Delta Dental negotiated fee).

Non Participating Dentists:

Benefits are paid at the Out of Network benefit level. Members may be held liable for the difference between the dentist's billed charge and the non-participating allowable.

Limitations

If a more expensive treatment than is functionally adequate is performed, Delta Dental Plan of Oregon will pay the applicable percentage of the maximum plan allowance for the least costly treatment.

Preventive (Class 1 Services)

- **Diagnostic** Routine or comprehensive examinations or consultations covered once in any 6-month period. Supplementary bitewing x-rays are covered once in any 12-month period. Complete series x rays or a panoramic film are covered once in any 5-year period.
- **Preventive** Prophylaxis (cleaning) or periodontal maintenance is covered once in any six-month period. Additional periodontal maintenance is covered for members with periodontal disease, up to a total of 2 additional periodontal maintenances per year. Topical application of fluoride is covered once in any 6-month period for members under age 19. For members age 19 and older, topical application of fluoride is covered once in any 6-month period if there is a recent history of periodontal surgery or high risk of decay due to medical disease or chemotherapy or similar type of treatment. Sealant benefits are limited to the unrestored, occlusal surfaces of permanent molars. Benefits will be limited to one sealant, per tooth, during any 5-year period.

Basic (Class 2 Services)

- **Oral Surgery** Limited to extractions and other minor surgical procedures.
- **Restorative** Amalgam and composite fillings are covered for all teeth. A separate charge for general anesthesia and/or IV sedation is not covered when used for non-surgical procedures.
- **Periodontic** Scaling and root planing is limited to once per quadrant in any 2-year period.

Major (Class 3 Services)

- **Implants** and implant removal are limited to once per lifetime per tooth space. A crown over an implant is covered once per lifetime of the implant.
- **Restorative** Cast restorations (including pontics) are covered once in a seven (7) year period on any tooth.
- **Prosthodontic** A bridge or denture (full or partial, including alternate benefits) will be covered once in a seven (7) year period only if the tooth, tooth site, or teeth involved have not received a cast restoration benefit in the past seven (7) years. Specialized or personalized prosthetics are limited to the cost of standard devices.
- **Occlusal Guard** (night guard) covered at 100% once in a five year period, up to \$150 maximum. Over-the-counter night guards are excluded.
- **Athletic mouth guard** covered at 50%, once in any 12-month period for members age 15 and under and once in any 24-month period age 16 and over. Over-the-counter athletic mouth guards are excluded.

Exclusions

- Services covered under worker's compensation or employer's liability laws and services covered by any federal, state, county, municipality or other governmental agency, except Medicaid.
- Services with respect to congenital (hereditary) or developmental (following birth) malformations or cosmetic reasons; including, but not limited to cleft palate, upper and lower jaw malformations, enamel hypoplasia (lack of development), fluorosis and disturbance of the temporomandibular joint.
- Services for rebuilding or maintaining chewing surfaces due to teeth out of alignment or occlusion, or for stabilizing the teeth except for occlusal guards.
- Services started prior to the date the individual became eligible for services under the program.
- Hypnosis, prescribed drugs, premedications or analgesia (e.g. nitrous oxide) or any other euphoric drugs.
- Hospital costs or any additional fees charged by the dentist because the patient is hospitalized.
- General anesthesia and/or IV sedation except when administered by a dentist in conjunction with covered oral surgery in his or her office.
- Plaque control and oral hygiene or dietary instructions.
- Experimental procedures.
- Missed or broken appointments.
- Precision attachments.
- Orthodontic services (except when an orthodontia rider is included).
- Services for cosmetic reasons.
- Claims submitted more than 12 months after the date of service are not covered.
- All other services or supplies, not specifically covered.

Delta Dental orthodontia rider



Delta Dental of Oregon & Alaska

Child Ortho 1000

Lifetime maximum

\$1,000

Members age 19+

What members pay

Not covered

Members under age 19 *

50%

*Eligible dependent children if treatment is started prior to their 17th birthday

How to use this dental plan

When you visit your dental provider, tell him or her you are a Delta Dental member.

Pre-determination

Your dental office can submit a pre-treatment plan to Delta Dental of Oregon on your behalf. We will return it to them indicating the dollar allowance which will be covered by your plan before you go forward with treatment.



Be in charge of your healthy smile

Get to know your benefits! myModa, your personalized member website, helps you manage your dental plan and find ways to improve and maintain your oral health.

Discover more ways to better oral health

- Click on Find Care to find a dentist near you
- Get in touch with a dental health coach and find answers to your oral health questions
- Use the Dental Optimizer for a cavity risk assessment, treatment cost estimates and dental health tips
- Find dental care while travelling outside the U.S.

Easily see and manage your benefits

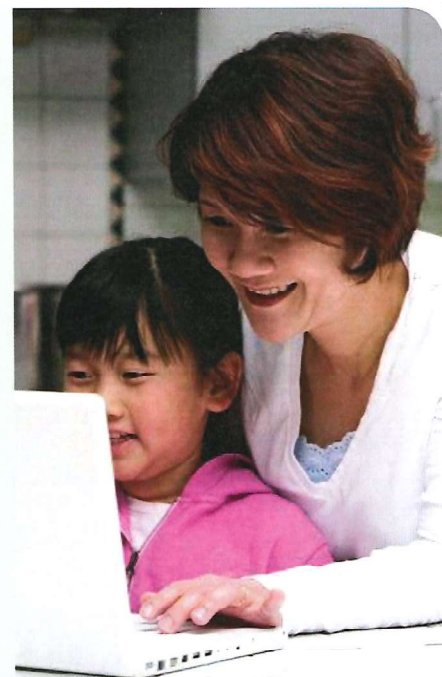
- View your benefit eligibility and history
- Receive and view electronic explanations of benefits (EOBs)
- View account information, such as your contact information and dependents

- Download your digital ID card or order a new one
- Check the status of pending claims, view your personal claims history and access claim forms

Log in to myModa 24/7

To sign in to myModa, visit modahealth.com. On the right-hand side of the home page, type in your username and password and click the Go! button.

If you don't have a myModa account, creating one is easy. You'll love everything you can do on myModa, like check your benefits, use interactive health tools, see your Member Handbook and more.



Questions?

We're here to help. Call us toll-free at 888-374-8907. TTY users, please call 711.



modahealth.com

➤ Active&Fit Direct™ program

Stay active and fit for less

Staying fit is important to your overall health and well-being. Joining a fitness center can help you add more physical activity to your day.

Join a health club for just \$25 a month!

As a Moda Health or Delta Dental member, you have access to the Active&Fit Direct™ program. For just \$25 a month,* you can choose from over 9,000 participating health clubs and YMCAs nationwide.

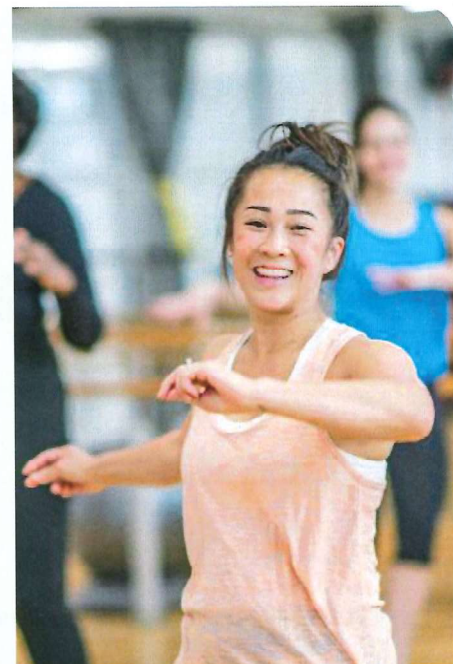
The program offers:

- A free guest pass to try out a fitness center before joining
- An option to switch gyms to make sure you find the right fit
- Access to online directory maps and a health club locator from any device
- Online tracking from a variety of wearable fitness devices, apps and exercise equipment

Ready to join?

Log in to your myModa account at modahealth.com. Select the Active&Fit Direct program link (under myHealth) to get started. Members should contact their gym of choice before signing up to see if there are any additional membership conditions or requirements.

**Initial enrollment is \$75. This includes a sign-up fee and covers the first two months. A three-month commitment is required. Applicable taxes may apply.*



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ATENCIÓN: Si habla español, hay disponibles servicios de ayuda con el idioma sin costo alguno para usted. Llame al 1-877-605-3229 (TTY: 711).

注意：如果您說中文，可得到免費語言幫助服務。請致電 1-877-605-3229（聾啞人專用：711）

➤ MyIDCare identity protection

Enroll in MyIDCare for financial and medical identity protection

As a Moda Health or Delta Dental member, you can take advantage of MyIDCare, a complete identity protection service. MyIDCare will look after your medical and financial info in one easy-to-use app. This added benefit is offered to members at no extra cost.

A trusted company

ID Experts is the largest provider of identity protection services to both the federal government and the U.S. healthcare industry. Their central product, MyIDCare, recently won consumer advocacy site Best Company's highest ranking.

Total protection

Medical identity theft is one of the fastest growing crimes in the U.S. Today's criminals are stealing more than financial data — they're taking personal information too. MyIDCare also includes an identity protection service to keep track of your health claims.

How it works

Once you enroll, MyIDCare scans for suspicious activity. Any change sends an alert so you can take action right away.

Sign up today!

Just log in to myModa and follow the links to MyIDCare. Be sure to have your member ID card handy.

If you don't have a myModa account, creating one is easy. Go to modahealth.com to enter your information.

Access all your monitoring in one convenient app:

- **Credit Monitoring:** Searches for changes to your credit file
- **Daily scanning:** Traces Social Security number use, change of address and activity on the dark web
- **Medical identity alerts:** Checks that health claims and records are correct
- **Lost wallet protection:** Helps cancel or replace missing contents
- **\$1 Million MyIDCare Insurance:** Reimburses eligible out-of-pocket expenses, including stolen funds



Questions?

We're here to help. Call us toll-free at 888-374-8907. TTY users, please call 711. Or email us at mymoda@modahealth.com.

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Health through Oral Wellness®

When it comes to oral health, we know some people need more care than others. Delta Dental of Oregon's Health through Oral Wellness® program offers extra benefits to members who have a greater risk for oral diseases.

The program uses an oral health assessment to find out your risk of tooth decay, gum disease and oral cancer. Based on your risk score, you may qualify for additional cleanings, fluoride treatments, sealants and periodontal maintenance.*

With extra benefits and related care, you can:

- Take charge of your oral health
- Prevent oral health issues before they happen
- Access resources to manage your oral health
- Learn how to achieve and maintain better oral wellness

Ready to get started?

Follow these simple steps to see if you qualify:

- 1 Visit deltadentalor.com/oralwellness/members to learn more about the program and take a free oral health risk self-assessment. You can choose to share your results with your dentist to start the conversation.
- 2 Talk to your dentist about the program. If they're not registered, ask them to call our toll-free Health through Oral Wellness provider line at 844-663-4433. Once registered, they can perform an oral health risk exam and can let you know if you qualify.

Still have questions?

We're here to help. Contact our Moda Employee Dental Customer Service Team at 503-412-4002.

*All enhanced dental benefits are subject to your plan's annual maximum and other limitations. The enhanced benefits feature is available to Moda employee members working for our locations in Oregon.



Delta Dental is part of the Moda, Inc. family of companies.

Our mission is the same as it was more than 60 years ago – to find a better way to health, every day, for the people and communities we serve.

As a founding member of the Delta Dental Plans Association, we offer affordable, quality dental coverage to people in the Pacific Northwest and beyond.

Delta Dental of Oregon and Alaska



deltadentalor.com