

## Victor Valley Union High School District

### Summary of Dental PPO Plans

	Proposed		Proposed	
Effective Date	7/1/2016		7/1/2016	
Renewal Date	7/1/2017		7/1/2017	
Carrier Name	REEP Delta Dental		REEP Delta Dental	
Plan Name	PPO Plan		PPO Incentive Plan	
Eligible Class	All Employees		All Employees	
	In-Network	Out-of-Network	In-Network	Out-of-Network
<b>General Plan Information</b>				
Annual Deductible/Individual	\$0	\$0	\$0	\$0
Annual Deductible/Family	\$0	\$0	\$0	\$0
Annual Plan Maximum	\$2,500 in/out of network combined	\$2,500 in/out of network combined	\$2,700 in/out of network combined	\$2,500 in/out of network combined
<b>Covered Services</b>				
Reasonable & Customary Percentile	N/A	N/A	70-100% - 70% first year eligible, increases 10% yearly provided member visits dentist annually, reduces 10% yearly if member does not visit dentist	70-100% - 70% first year eligible, increases 10% yearly provided member visits dentist annually, reduces 10% yearly if member does not visit dentist
<b>Diagnostic and Preventive Services</b>				
Diagnostic and Preventive	100% 4 / calendar year	50% 4 / calendar year	70-100% 2 / calendar year	70-100% 2 / per calendar
Oral Exams	100%	50%	70-100%	70-100%
Bitewing X-Rays	100%	50%	70-100%	70-100%
Full Mouth X-Rays	100% 1 every 3 years	50% 1 every 3 years	70-100% 1 every 3 years	70-100% 1 every 3 years
Cleaning and Scaling	100%	50%	70-100%	70-100%
Fluoride Treatments	100%	50%	70-100%	70-100%
Space Maintainers	100%	50%	70-100%	70-100%
Sealants	100% dependent children under 14	50% dependent children under 14	70-100% dependent children under age 14	70-100% dependent children under age 14
<b>Basic Services</b>				
Basic	100%	50%	70-100%	70-100%
Restorative: Amalgam, Synthetic Porcelain and Plastic Restorations	100%	50%	70-100%	70-100%
<b>(Fillings)</b>				
Endodontic Treatment	100%	50%	70-100%	70-100%
Periodontic Treatment	100%	50%	70-100%	70-100%
Re-linings and Re-basings of Existing Removable Dentures	50%	50%	50%	50%
Repair or Re-cementing of Crowns, Inlays, Onlays, Dentures or	100% crowns/50% bridges & dentures	100% crowns/50% bridges & dentures	70-100% crowns/50% bridges & dentures	70-100% crowns/50% bridges & dentures
<b>Bridgework</b>				
<b>Major Services</b>				
Major	50%	50%	50%	50%
Crowns, Jackets and Cast Restoration Benefits	100%	50%	70-100% same tooth/once every 5 years - in/out-of-network combined	70-100% same tooth/once every 5 years - in/out-of-network combined
Bridges & Dentures	50%	50%	50%	50%
<b>Orthodontia Services</b>				
	50% to \$1500 Lifetime Maximum	50% to \$1500 Lifetime Maximum	Not covered	Not covered