

2020 | Dental

BENEFIT	DELTA DENTAL PPO PLAN			UNITED CONCORDIA DHMO PLAN
	Services at the USC School of Dentistry	In-Network	Out-of-Network	Primary Dental Office (PDO)
OUT-OF-POCKET MAXIMUM				
Out-of-pocket maximum (combined)	\$1,500/person	\$1,500/person	\$1,500/person	Not applicable
DEDUCTIBLE				
Individual	\$50	\$50	\$75	\$0
Per family	\$150	\$150	\$225	\$0
PREVENTIVE AND DIAGNOSTIC				
Cleaning, exams, x-ray	100%, no deductible	90%, no deductible	80%, after deductible	\$0 copay
BASIC SERVICES				
Routine extractions, fillings, root canal therapy, osseous surgery, oral surgery	100%, after deductible	80%, after deductible	70%, after deductible	\$0-\$140 copay
MAJOR SERVICES				
Crowns, bridges, dentures	100%, after deductible	60%, after deductible	50%, after deductible	Crowns: \$25-\$75 copay* Bridges: \$70-\$90 copay* Dentures: \$100-\$120 copay
ORTHODONTIA				
Comprehensive orthodontic treatment	50%	50%	50%	\$1,500-\$2,000 copay
Lifetime maximum	\$1,500	\$1,500	\$1,500	Not applicable. Orthodontic benefits are available once per lifetime per member.
Eligibility for orthodontia	Covers both children and adults	Covers both children and adults	Covers both children and adults	Covers both children and adults
IMPLANTS				
Implant rider	50%	50%	50%	Not covered
Implants lifetime maximum	\$1,500	\$1,500	\$1,500	Not applicable

* Charges for the use of precious (high noble) or semiprecious (noble) metal are not included in the copayment for crowns, bridges, pontics, inlays and onlays. The decision to use these materials is a cooperative effort between the provider and the patient, based on the professional advice of the provider. Providers are expected to charge no more than an additional \$125 for these materials.