



CITY OF URBANA – Network Plan

Delta Dental PPO Plan Highlights

Group #10992

Introduction

The Delta Dental PPO program allows you to go to any in- or out-of-network general or specialty dentist at the time of treatment. City of Urbana dental enrollees have access to two networks, Delta Dental PPO and Delta Dental Premier managed fee-for-service. When you call your dentist's office to make an appointment, ask if your dentist participates in either Delta Dental PPO or Premier. Your out-of-pocket costs will vary depending on whether he/she participates in Delta Dental PPO, Premier or neither (i.e., "out-of-network"). **You will maximize your benefits by receiving care from a Delta Dental PPO network dentist.** There are 143,000 Delta Dental PPO and 223,000 Delta Dental Premier dentist locations nationwide.

Choosing Your Dentist

Under your Dental Plan, you may go to any in- or out-of-network general or specialty dentist. However, it is to your advantage to choose a Delta Dental PPO or Premier network dentist for the following reasons:

1) Payment to Delta Dental PPO dentists is based on reduced fees; payment to Premier dentists is based on Delta Dental's maximum plan allowance (MPA). In both networks, you only have to pay your deductible and coinsurance – *you will not be "balance billed" for charges that exceed the reduced PPO fee if you receive treatment from a Delta Dental PPO dentist or the MPA if you receive treatment from a Premier dentist.**

For example, if you need a crown, assume the Delta Dental PPO fee allowance is \$500 and the MPA is \$600. If your plan covers crowns at 50% and your dentist normally charges \$700, your out-of-pocket cost (excluding deductible) would be:

Delta Dental PPO Dentist - \$250
(50% of the \$500 PPO fee allowance)

Delta Dental Premier Dentist - \$300
(50% of the \$600 MPA)

Out-of-Network Dentist - \$400
(50% of the \$600 MPA plus \$100 difference between the MPA and the dentist's billed charge)

2) Because we reimburse Delta Dental PPO and Premier dentists directly, they agree to charge you no more than your deductible and coinsurance; in other words, *you do not have to pay the whole bill up-front and wait for reimbursement.*

3) Out-of-network dentists do not accept Delta Dental's MPA as payment-in-full. If an out-of-network dentist's charge exceeds the MPA, you must pay the difference plus your deductible and coinsurance. At the dentist's discretion, *you may also have to pay the entire bill in advance.*

4) Claim forms will be completed and submitted at no charge. Out-of-network dentists may require you to complete forms yourself or to pay a service charge.

**If your Delta Dental PPO or Premier dentist inadvertently charges you for amounts payable by Delta Dental, please call our customer service department at 1-800-323-1743.*

Non-Covered Services

There are some limitations on the expenses for which the City of Urbana Dental Plan pays. For further information, refer to your certificate of coverage or call our customer service department.

Finding a Network Dentist

To verify your dentist's participation status, simply ask him/her if he/she is a Delta Dental PPO or Delta Dental Premier network dentist, call our interactive voice response (IVR) phone system, contact our customer service department or visit our Web site.

Visit Delta Dental of Illinois' Web site at
www.deltadentalil.com

The City of Urbana Dental Plan utilizes the Delta Dental PPO and Delta Dental Premier networks. To locate a network dentist, click on Dentist Search in the Subscriber section.

You can search by:

- 1) City, state and ZIP code
- 2) Specialty
- 3) Dentist name (optional)

Summary of Benefits and Covered Services

Annual Maximum

\$1,500/person

TO GO

Enrollees may carryover unused portions of their annual maximums to the new year's annual maximum. Maximum amounts eligible for carryover are subject to limitations.

Annual Deductible

(applies to Basic/Major only)

\$50/person

\$100/person

\$100/person

\$150/family

\$300/family

\$300/family

Lifetime Ortho. Maximum

\$1,000/person

\$1,000/person

\$1,000/person

Delta Dental PPO

Delta Dental Premier

Out-of-Network

Preventive/Diagnostic

100% of reduced fee*

70% of MPA**

70% of MPA***

- ◆ oral evaluations (two per benefit year)
- ◆ X-rays (bitewings only – two per benefit year)
- ◆ prophylaxis (cleaning; two per benefit year)
- ◆ fluoride treatment (once per benefit year for children under age 19)
- ◆ space maintainers
- ◆ harmful habit appliance
- ◆ sealants

Basic

80% of reduced fee*

80% of MPA**

40% of MPA***

- ◆ amalgam fillings
- ◆ x-rays, excluding bitewings (full mouth - once every three years)
- ◆ emergency exam & palliative treatment
- ◆ non-surgical periodontics

Major

50% of reduced fee*

50% of MPA**

40% of MPA***

- ◆ crowns, jackets, cast restorations
- ◆ oral surgery
- ◆ general anesthesia (in conjunction with oral surgery)
- ◆ endodontics
- ◆ fixed/removable bridges
- ◆ partial/full dentures
- ◆ surgical periodontics
- ◆ Implants

Orthodontia

- ◆ for dependent children under age 19

50% of reduced fee* subject to lifetime maximum

50% of dentist's usual fee subject to lifetime maximum

50% of dentist's usual fee subject to lifetime maximum

*You will not be "balance billed" for charges exceeding Delta Dental's allowed PPO fee

**You will not be "balance billed" for charges exceeding Delta Dental's maximum plan allowance (MPA)

***You are responsible for charges exceeding Delta Dental's maximum plan allowance (MPA)

The preceding information is a brief summary of the City of Urbana Dental Plan and the services it covers. If you have specific questions regarding benefit coverage, limitations or exclusions, contact Delta Dental at 1-800-323-1743.

Note: Delta Dental imposes no restrictions on the method of diagnosis or treatment by a treating dentist. A benefit determination relates only to the level of payment that your group dental plan is required to make.



CITY OF URBANA – Premier Plan

Delta Dental PPO Plan Highlights

Group #10992

Introduction

The Delta Dental PPO program allows you to go to any in- or out-of-network general or specialty dentist at the time of treatment. City of Urbana dental enrollees have access to two networks, Delta Dental PPO and Delta Dental Premier managed fee-for-service. When you call your dentist’s office to make an appointment, ask if your dentist participates in either Delta Dental PPO or Premier. Your out-of-pocket costs will vary depending on whether he/she participates in Delta Dental PPO, Premier or neither (i.e., “out-of-network”). **You will maximize your benefits by receiving care from a Delta Dental PPO network dentist.**

Choosing Your Dentist

Under your Dental Plan, you may go to any in- or out-of-network general or specialty dentist. However, it is to your advantage to choose a Delta Dental PPO or Premier network dentist for the following reasons:

1) Payment to Delta Dental PPO dentists is based on reduced fees; payment to Premier dentists is based on Delta Dental’s maximum plan allowance (MPA). In both networks, you only have to pay your deductible and coinsurance – *you will not be “balance billed” for charges that exceed the reduced PPO fee if you receive treatment from a Delta Dental PPO dentist or the MPA if you receive treatment from a Premier dentist.**

For example, if you need a crown, assume the Delta Dental PPO fee allowance is \$500 and the MPA is \$600. If your plan covers crowns at 50% and your dentist normally charges \$700, your out-of-pocket cost (excluding deductible) would be:

Delta Dental PPO Dentist – \$250
(50% of the \$500 PPO fee allowance)

Delta Dental Premier Dentist – \$300
(50% of the \$600 MPA)

Out-of-Network Dentist – \$400
(50% of the \$600 MPA plus \$100 difference between the MPA and the dentist’s billed charge)

dentists directly, they agree to charge you no more than your deductible and coinsurance; in other words, *you do not have to pay the whole bill up-front and wait for reimbursement.*

3) Out-of-network dentists do not accept Delta Dental’s MPA as payment-in-full. If an out-of-network dentist’s charge exceeds the MPA, you must pay the difference plus your deductible and coinsurance. At the dentist’s discretion, *you may also have to pay the entire bill in advance.*

4) Claim forms will be completed and submitted at no charge. Out-of-network dentists may require you to complete forms yourself or to pay a service charge.

**If your Delta Dental PPO or Premier dentist inadvertently charges you for amounts payable by Delta Dental, please call our customer service department at 1-800-323-1743.*

Non-Covered Services

There are some limitations on the expenses for which the City of Urbana Dental Plan pays. For further information, refer to your certificate of coverage or call our customer service department.

Finding a Network Dentist

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You can search by:

- 1) City, state and ZIP code
- 2) Specialty
- 3) Dentist name (optional)

2) Because we reimburse Delta Dental PPO and Premier

Summary of Benefits and Covered Services

Annual Maximum

\$1,500/person

TO GO

Enrollees may carryover unused portions of their annual maximums to the new year's annual maximum. Maximum amounts eligible for carryover are subject to limitations.

Annual Deductible

\$50/person; \$150/family

(applies to Basic/Major only)

Lifetime Ortho. Maximum

\$1,000

	<u>Delta Dental PPO</u>	<u>Delta Dental Premier</u>	<u>Out-of-Network</u>
Preventive/Diagnostic	100% of reduced fee*	100% of MPA**	100% of MPA***
<ul style="list-style-type: none"> ◆ oral evaluations (two per benefit year) ◆ X-rays (bitewings – two per benefit year; full mouth - once every three years) ◆ prophylaxis (cleaning; two per benefit year) ◆ fluoride treatment (once per benefit year for children under age 19) ◆ space maintainers ◆ harmful habit appliance ◆ sealants 			
Basic	80% of reduced fee*	80% of MPA**	80% of MPA***
<ul style="list-style-type: none"> ◆ amalgam fillings ◆ oral surgery ◆ non-surgical periodontics ◆ general anesthesia (in conjunction with oral surgery) ◆ emergency exam & palliative treatment 			
Major	50% of reduced fee*	50% of MPA**	50% of MPA***
<ul style="list-style-type: none"> ◆ crowns, jackets, cast restorations ◆ fixed/removable bridges ◆ partial/full dentures ◆ surgical periodontics ◆ endodontics ◆ implants 			
Orthodontia	50% of reduced fee* subject to lifetime maximum	50% of dentist's usual fee subject to lifetime maximum	50% of dentist's usual fee subject to lifetime maximum
<ul style="list-style-type: none"> ◆ for dependent children under age 19 			
	*You will not be "balance" billed" for charges exceeding Delta Dental's allowed PPO fee	**You will not be "balance billed" for charges exceeding Delta Dental's maximum plan allowance (MPA)	***You are responsible for charges exceeding Delta Dental's maximum plan allowance (MPA)

The preceding information is a brief summary of the City of Urbana Dental Plan and the services it covers. If you have specific questions regarding benefit coverage, limitations or exclusions, contact Delta Dental at 1-800-323-1743.

Note: Delta Dental imposes no restrictions on the method of diagnosis or treatment by a treating dentist. A benefit determination relates only to the level of payment that your group dental plan is required to make.



Enhanced Benefits Program

Oral Health Meets Overall Health with Delta Dental of Illinois

Delta Dental of Illinois' Enhanced Benefits Program integrates medical and dental care – where oral health meets overall health. This program enhances coverage for individuals who have specific health conditions that can be positively affected by additional oral health care. These enhancements are based on scientific evidence that shows treating and preventing oral disease in these situations can improve overall health. Our Enhanced Benefits Program includes additional cleanings and/or applications of topical fluoride. The costs of the additional cleanings and fluoride treatments will be applied to enrollees' annual maximums.

People Eligible	Treatment	Coverage Level	Frequency per Benefit Year
Individuals with: <ul style="list-style-type: none"> • Diabetes • Kidney Failure/Dialysis Treatment • High-Risk Cardiac Conditions* 	Prophylaxis (General Cleaning) and Periodontal Maintenance	Same Percent as the Group Contracted Benefit Level	4 Times Total in any Combination
Individuals with: <ul style="list-style-type: none"> • Periodontal Disease • Suppressed Immune Systems** • Cancer-Related Chemotherapy and/or Radiation Treatments 	Prophylaxis (General Cleaning) and Periodontal Maintenance Topical Fluoride Treatment (No Age Limits)	Same Percent as the Group Contracted Benefit Level Same percent as the Group Contracted Benefit Level	4 Times Total in any Combination Frequency Determined by Group Contract
Pregnant Women	Prophylaxis (General Cleaning) and Periodontal Maintenance	Same Percent as the Group Contracted Benefit Level	3 Times Total in any Combination

The Enhanced Benefits Program is available with Delta Dental PPOSM and Delta Dental Premier[®] plans only.

* Includes the following conditions: a history of infective endocarditis; certain congenital heart defects; individuals with artificial heart valves; heart valve defects caused by acquired conditions like rheumatic heart disease; hypertrophic cardiomyopathy, which causes abnormal thickening of the heart muscle; individuals with pulmonary shunts or conduits; mitral valve prolapsed with regurgitation (blood leakage).

** Includes the following conditions: HIV positive, organ transplant, stem cell (bone marrow) transplant.

Finding a Delta Dental PPO™ or Delta Dental Premier® Dentist

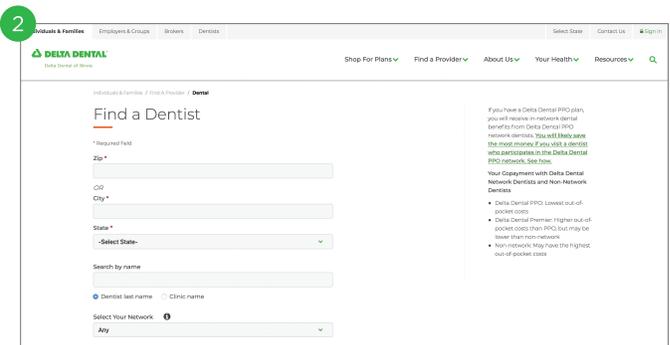
Finding a Delta Dental network dentist is easy. More than 3 out of every 4 dentists nationwide participate in a Delta Dental network. In Illinois, more than 75 percent of dentists participate in a Delta Dental network. You can find a network dentist today by using the Dentist Search on our website or calling our automated phone system.

Provider Search

1 Go to deltadentalil.com, and select “Find a Provider.” On the following page, select “Dental.”



2 To start your search, you can either enter the location where you want to locate network dentists (search by city/state or ZIP code), or search for a particular dentist or practice by name and ZIP code.

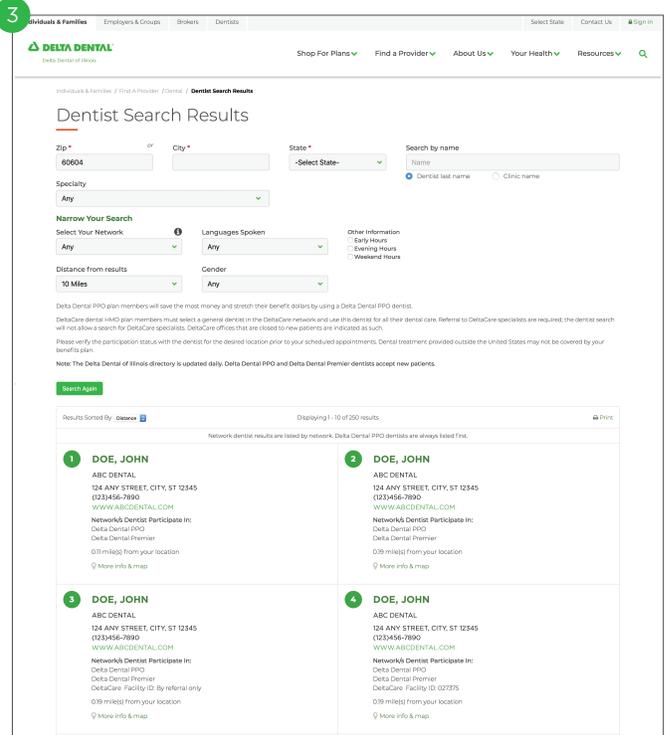


3 Results will automatically display by proximity (within 10 miles from city or ZIP code) and all Delta Dental networks the dentist participates in will be listed. You can change the distance by selecting a new option under the “Distance from results” dropdown menu and clicking “Search Again.”

4 You have the option to save or narrow your search based on the Delta Dental network a dentist participates in. You will save the most if you use a Delta Dental PPO network dentist.

Any field marked with a red asterisk is a required field.

5 You can further narrow your search by selecting a specialty (such as orthodontist), languages spoken and gender.



Automated Phone System

You can also find a dentist through our automated phone system. Delta Dental PPO and Delta Dental Premier members can call 800-323-1743, say “Dentist Directory” and follow the automated instructions.

Member Connection

Connecting with Delta Dental of Illinois is easy!

Get real-time benefit and claim information 24 hours a day, seven days a week through the Member Connection at deltadentalil.com or through our automated phone system at 800-323-1743.

With the Member Connection, you can find everything you need to know about your and your covered dependents' benefits, including:

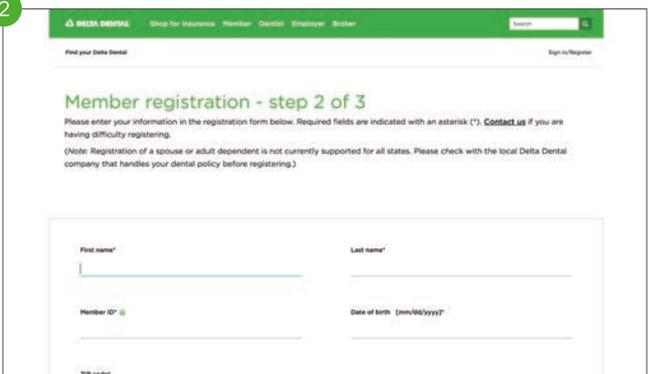
- Claim status
- Eligibility information
- Maximum and deductibles used to date
- Benefit levels
- Frequency and age limits
- Waiting periods
- Preventive history
- Explanation of Benefits (EOBs)

How to Register:

1 Go to deltadentalil.com, select “Member of employer/group plan” in the “My Account Log In” box located on the right side of the homepage. On the next page, click “New to Delta Dental? Enroll Here.”



2 Complete the online registration. Enter the primary enrollee's first and last name (the name must appear exactly as what your employer entered during enrollment; e.g., “Bob” may be “Robert”), the assigned member ID or Social Security number and date of birth (enter two-digit month, two-digit day and four-digit year with dividers, e.g., 03/15/1984).

A screenshot of the Delta Dental member registration form, step 2 of 3. The heading is "Member registration - step 2 of 3". Below the heading, there is a note: "Please enter your information in the registration form below. Required fields are indicated with an asterisk (*). Contact us if you are having difficulty registering." and a smaller note: "(Note: Registration of a spouse or adult dependent is not currently supported for all states. Please check with the local Delta Dental company that handles your dental policy before registering.)". The form contains several input fields: "First name*", "Last name*", "Member ID*", and "Date of birth (mm/dd/yyyy)*". There is also a "ZIP code*" field at the bottom. A "Sign up/Register" button is visible in the top right corner.

- 3 Once registered, you can easily access your and your covered dependents' benefits and claims information, print a temporary ID card, sign up to receive electronic EOBs (Go Green E-Statements), conduct a procedure code search and access EOB history.

Automated Phone System. Faster service for you.

You can also call 800-323-1743 to access our automated phone system 24 hours a day, seven days a week or to speak to a customer service representative during normal business hours (7 a.m. to 7 p.m. Monday through Thursday, 7 a.m. to 6 p.m. Friday, Central Time.).

