Plan Benefit Highlights for: Florida College System Risk Management Consortium

PPO Plan 1

Group No: 16020

Eligibility	Primary enrollee, spouse (includes domestic partner) and eligible dependent children to the end of the birth year dependent turns age 26			
Deductibles	\$50 per person / \$150 per family each calendar year			
Deductibles waived for Diagnostic & Preventive (D & P)?	Yes			
Maximums	\$1,000 per person each calendar year			
D & P counts toward maximum?	Yes			
Waiting Period(s)	Basic Benefits	Major Benefits	Prosthodontics	Orthodontics
	None	None	None	N/A

Benefits and Covered Services*	Delta Dental PPO dentists**	Non-Delta Dental PPO dentists**	
Diagnostic & Preventive Services (D & P) Exams, cleanings and x-rays	100%		
Basic Services Fillings and sealants	80%	60%	
Endodontics (root canals) Covered Under Basic Services	80%	60%	
Periodontics (gum treatment) Covered Under Basic Services	80%	60%	
Oral Surgery Covered Under Basic Services	80%	60%	
Major Services Crowns, inlays, onlays and cast restorations	50%	40%	
Prosthodontics Bridges, dentures and implants	50%	40%	
Orthodontic Benefits	0%	0%	

^{*} Limitations or waiting periods may apply for some benefits; some services may be excluded from your plan. Reimbursement is based on Delta Dental maximum contract allowances and not necessarily each dentist's submitted fees.

^{**} Reimbursement is based on PPO contracted fees for PPO dentists, PPO contracted fees for Premier dentists and PPO contracted fees for non-Delta Dental dentists.

Delta Dental Insurance Company	Customer Service	Claims Address
1130 Sanctuary Parkway, Suite 600	800-521-2651	P.O. Box 1809
Alpharetta, GA 30009		Alpharetta, GA 30023-1809

deltadentalins.com

This benefit information is not intended or designed to replace or serve as the plan's Evidence of Coverage or Summary Plan Description. If you have specific questions regarding the benefits, limitations or exclusions for your plan, please consult your company's benefits representative.