

# Delta Dental of California

## Regional Center of the East Bay – Group # 1862-0298

Updated 1/1/2017

### Highlights of your Delta Dental Premier Plan

	DeltaPremier Dentist <sup>1</sup>	Non-Delta Dentist <sup>2</sup>
<b>WHO IS COVERED</b>	Primary enrollee and spouse/domestic partner as well as children to age 26	
<b>DEDUCTIBLES</b>	<b>\$50 Individual / \$150 Family (waived on D&amp;P)</b>	<b>\$50 Individual / \$150 Family</b>
<b>BENEFITS MAXIMUM</b>	The Maximum benefit paid per calendar year is <b>\$2,500 per person</b>	The Maximum benefit paid per calendar year is <b>\$2,500 per person</b>
<b>DIAGNOSTIC AND PREVENTIVE BENEFITS</b> Oral examinations, cleanings, x-rays, biopsy/tissue examinations, fluoride treatment, space maintainers, specialist consultation	100% of a <i>DeltaPremier</i> Dentist fee	100% of <i>UCR</i>
<b>BASIC BENEFITS-</b> oral surgery (extractions), fillings, root canals, periodontic (gum) treatment, sealants	85% of a <i>DeltaPremier</i> Dentist fee	85% of <i>UCR</i>
<b>CROWNS, JACKETS AND CAST RESTORATIONS</b>	85% of a <i>DeltaPremier</i> Dentist fee	85% of <i>UCR</i>
<b>PROSTHODONTIC BENEFITS-</b> Bridges, partial dentures, full dentures Implant coverage	60% of a <i>DeltaPremier</i> Dentist fee	60% of <i>UCR</i>
<b>ORTHODONTIC BENEFITS</b> Dependent Children	60% of a <i>DeltaPremier</i> Dentist fee <b>\$1,500 Lifetime Maximum</b>	60% of <i>UCR</i> <b>\$1,500 Lifetime Maximum</b>

#### SERVICES THAT ARE NOT COVERED

- Extra-oral grafts
- Cosmetic surgery or dentistry or services to correct congenital malformation
- Services for injuries/conditions covered under Workers' Compensation or Employer's Liability Laws
- Anesthesia (except for general anesthesia for oral surgery)

This *DeltaPremier* program is administered by the **HEALTH CARE EMPLOYEES/ EMPLOYER DENTAL AND MEDICAL TRUST**. If you have specific questions regarding benefit structure, limitations or exclusions, consult the Evidence of Coverage or contact the Customer and Member Services department at (925) 803-1880.

Delta Dental Online at [www.deltadentalins.com](http://www.deltadentalins.com)

<sup>1</sup> The approved fee for a *DeltaPremier* dentist is the filed fee

<sup>2</sup> The Non-Delta dentist payment is based on the fee that satisfies the majority of Delta dentists (*UCR*)

**\* UCR – Usual, Customary and Reasonable Fee**

- A **Usual** fee is the amount which an individual dentist regularly charges and received for a given service or the fee actually charged, whichever is less
- A **Customary** fee is within the range of usual fees charged and received for a particular service by dentists of similar training in the same geographic area.
- A **Reasonable** fee schedule is reasonable if it is Usual and Customary.

\*Age Limit Changed 1/1/2013