

Summary of Benefits

Group Number: 95799

Effective Date of Program: July 1 – June 30

Dependents to Age: 27 **Full-time Students to Age:** 27 – (Please see “Covered Dependents” in the “Eligibility” section for requirements).

Deductibles:

Per Person, per Benefit Accumulation Period: \$0.00
 Per Family, per Benefit Accumulation Period: \$0.00

Benefit Maximums:

Per Person, per Benefit Accumulation Period: \$1500.00

 Orthodontic Maximum Benefit per Lifetime
 Per Employee, Spouse, Dependent Child to age 19,
 Students to age 25: : \$1500.00
 (not available to retirees)

The benefits of your dental plan will depend on the dentist you choose. Delta Dental PPO Dentists agree to accept payment based on a reduced schedule, which means your out-of-pocket costs will be less. The coverage percentage listed in the Delta Dental PPO column applies.

Delta Dental Premier Dentists agree to not charge you any amount that exceeds the MPA. The coverage percentage listed in the All Other Dentists column applies when treatment is provided by Delta Dental Premier Dentists or by dentists who have not signed any agreements with Delta Dental.

Benefits:	<u>Delta Dental</u>	<u>All Other</u>
	<u>PPO</u>	<u>Dentists</u>
Diagnostic and Preventive Procedures	100%	100%
Basic Restorative Procedures	100%	100%
Major Restorative Procedures	50%	50%
Orthodontic Procedures	100%	100%

After you have satisfied the deductible requirements as stated, the program provides payment at the indicated percentage of fees, up to the maximum stated for each eligible person in each benefit accumulation period. A benefit accumulation period is a 12-month period of time over which deductibles (if any) and maximums apply. The benefit accumulation period is January 1, 2006 through June 30, 2007 and July 1 through June 30 thereafter.