Delta Dental Quick Plan Comparison

- **Delta Dental PPO**
  - $25.00 annual deductible for each person,
  - $2,500.00 annual maximum coverage per member
  - No copays
  - Diagnostic & Preventative (i.e., exams, cleanings, X-Rays) covered at 100%;
  - Major Work (i.e., crown, bridge, etc...) 75/25; Employer covers 75%, Employee pays 25%
  - Choose any licensed provider
  - Change providers at any time without notice
  - Orthodontics $2,000.00 one-time contribution from Delta Dental per member
  - Dentures/Implants covered at 75%
  - No pre-authorization required
  - Nationwide Coverage

- **Delta Care USA – DMO**
  - No or low copayments
  - No annual maximum coverage
  - Limited to a list of licensed providers (list available on www.deltadentalins.com)
  - Must contact Delta Dental to change provider
  - Orthodontics covered for 24 month - must pay the first $1,350.00; additional months are $125/month paid by employee
  - Pre-authorization for treatments provided by specialist
  - California-Only coverage
Choose Your Plan
Love your smile

Delta Dental PPO℠ & DeltaCare® USA*
City of Sacramento, Group #09505, DCUSA #75500

Your company lets you choose between two dental plans from Delta Dental. Either way, you’ll get reliable dentist networks, affordable preventive care and a healthy smile that you’ll love to show. Your options are:

Delta Dental PPO
This preferred provider plan offers the convenience and flexibility of visiting any licensed dentist, anywhere. Covered services are paid based on a percentage — if, for example, fillings are covered at 80%, you pay the remaining 20%. Get the most plan value by choosing a Delta Dental PPO dentist. PPO network dentists complete claim forms for you and can help advise you on questions regarding your share of the payment.

DeltaCare USA
Under this HMO-type plan, you’ll have your choice of skilled primary care dentists from the DeltaCare USA network. Select a primary care dentist, who will then coordinate any needed referrals to a specialist. Covered services provided by your DeltaCare USA dentist have preset copayments (dollar amounts), which are listed in your plan booklet. There are no maximums or deductibles for covered services. *See the back page of this brochure of the underwriters and administrators of these plans in your state.

Newly covered?
Visit deltadentalins.com/welcome.

LEGAL NOTICES: Access federal and state legal notices related to your plan: deltadentalins.com/about/legal/index-enrollee.html
1 In Texas, Delta Dental Insurance Company offers a Dental Provider Organization (DPO) plan.
2 In WY, you do not need to select a primary care dentist, but you must visit a network dentist to receive benefits. In the following states, you can maximize your savings when you visit a network dentist, although you may visit any licensed dentist and receive out-of-network coverage: AK, CT, LA, ME, MS, MT, NC, ND, NH, OK, SD, VT. Refer to your plan booklet for details about your out-of-network benefits.
3 Refer to your plan booklet for more information about covered services, deductibles and maximums.

We keep you smiling®
deltadentalins.com/enrollees
### Compare Plan Features

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<tr>
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<th>Delta Dental PPO</th>
<th>DeltaCare USA</th>
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<tbody>
<tr>
<td>Can I go to any dentist?</td>
<td>You can visit any licensed dentist to receive coverage, but you’ll save the most at an in-network dentist.</td>
<td>You must select a DeltaCare USA primary care dentist and visit this dentist to receive benefits.³</td>
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<td>What procedures are covered?</td>
<td>Your plan covers a wide range of services, with no exclusions for most pre-existing conditions. Preventive care, like routine cleanings and exams, is offered at low or no cost.</td>
<td>Your plan covers over 300 procedures, with no exclusions for most pre-existing conditions. Preventive care, like routine cleanings and exams, has low or no copayments.</td>
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<td>Are there deductibles and maximums?</td>
<td>Yes, most plans have an annual deductible and maximum.</td>
<td>No, there are no annual deductibles or maximums.³</td>
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<td>Am I covered for treatment I began under a different employer-sponsored dental plan?</td>
<td>Coverage is provided only for treatment started and completed after your effective date. Orthodontic treatment may be an exception to this rule.</td>
<td>Coverage is provided only for treatment started and completed after your effective date. Orthodontic treatment may be an exception to this rule.</td>
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<tr>
<td>What if I started orthodontic treatment under my previous dental plan?</td>
<td>Typically, Delta Dental pays the remaining benefit not paid by your prior dental plan.</td>
<td>You are responsible for the copayments and fees subject to the provisions of your prior dental plan.</td>
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<td>What happens if I need to see a specialist?</td>
<td>You do not need a referral from your dentist.</td>
<td>Contact your DeltaCare USA primary care dentist to coordinate your referral.⁵</td>
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<td>What is my out-of-area coverage?</td>
<td>You can visit any licensed dentist.</td>
<td>You have a limited benefit to go out of network for emergency care.</td>
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<td>How do I change my dentist?</td>
<td>You can change your dentist at any time without contacting us.</td>
<td>You can change your selected or assigned primary care dentist online or by telephone.⁶</td>
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<tr>
<td>Do I need to fill out claims?</td>
<td>If you visit a Delta Dental dentist, the dental office will file the claim for you. If you go to a non-Delta Dental dentist, you may have to submit the claim yourself.</td>
<td>There are generally no claim forms under your plan.⁷</td>
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</table>

¹ This comparison is based on the coverage of a typical plan. Please refer to your plan booklet for specific benefits, limitations, exclusions, waiting periods and other coverage details.

² In WY, you do not need to select a primary care dentist, but you must visit a network dentist to receive benefits. In the following states, you can maximize your savings when you visit a network dentist, although you may visit any licensed dentist and receive out-of-network coverage: AK, CT, LA, ME, MS, MT, NC, ND, NH, OK, SD, VT. Refer to your plan booklet for details about your out-of-network benefits.

³ In AK, CT, ND and SD, you have an out-of-network calendar year maximum of $500 when you visit an out-of-network dentist.

⁴ Except in Texas; please refer to your plan booklet for details.

⁵ Most services not performed by your primary care dentist must be authorized by Delta Dental. In some states, specialty care benefits are only available for services performed by an in-network specialist. Refer to your plan booklet for details.

⁶ In the following states, you can change your dentist any time without contacting Delta Dental: AK, CT, LA, ME, MS, MT, NC, ND, NH, OK, SD, VT, WY.

⁷ You may have to complete a claim form if you visit an out-of-network dentist, such as for limited emergency treatment or in the following states: AK, CT, LA, ME, MS, MT, NC, ND, NH, OK, SD, VT.