



DENTAL QUOTE

A.S.R.S.

Plan Name: PPO plus Premier

Proposed Effective Date: 01/01/2021

Administrative Services Only

Quote is valid for 60 days from effective date.

If you have questions, please contact:

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Dental Benefits Proposal for A.S.R.S.
Proposed Effective Date: 01/01/2021
Plan Name: PPO plus Premier
Requested High Plan Option: 2(D) Best and Final

DELTA DENTAL PPO PLUS PREMIER®

Benefit Coverage	Delta Dental PPO Dentist	Delta Dental Premier Dentist ¹	Out-of-Network Dentist ¹
Individual Deductible/Family Deductible	\$50/\$150	\$50/\$150	\$50/\$150
Annual Maximum Benefit	\$2,000	\$2,000	\$2,000
Lifetime Orthodontia	Not covered	Not covered	Not covered
Preventive Services	100%	100%	100%
Basic Services	80% ²	80% ²	80% ²
Major Services	Year 1: 25% Year 2+: 50%	Year 1: 25% Year 2+: 50%	Year 1: 25% Year 2+: 50%
Orthodontia	Not covered	Not covered	Not covered
Rate of Reimbursement	PPO Fee	Premier R&C	80th Percentile
Is Patient Responsible for Dentist's Total Billed Charges?	No	No	Yes - dentist can collect up to their full billed charges

¹ Members may incur higher out-of-pocket costs when seeing a Premier or out-of-network dentist.

² Deductible applies to these services.

Quote Assumes the Following:

- Proposed Effective Date: 01/01/2021
- Assumed Employee Participation: 43,069 enrolled
- Assumed Employer Contribution: 0%
- Retention accounting fully insured participating funding arrangement
- Retention quoted at 9.7%

Benefit Highlights:

- Oral Surgery: Minor in Basic / Major in Major
- Periodontics: Basic
- Soft/connective tissue grafts: Major
- Endodontics: Major
- Pulp caps/pulpotomy: Basic
- Sealants Covered under: Preventive
- Composite Fillings On All Teeth: Yes
- Preventive services do not apply to calendar year maximum
- This plan design matches the high PPO plan option 2 requested in the Best and Final

RATES

Tier 3 Rates	Premium/Month
Employee	\$36.78
Employee + 1	\$73.40
Employee + 2 or more	\$103.87

Rates are guaranteed for 3 years.

Year 4 rate cap: 5%

Year 5 rate cap: 6.5%

If DDAZ is the sole PPO and DHMO carrier, year 4 will have a renewal rate cap of 3% and year 5 will have a renewal rate cap of 4.5%.

Here is how this plan will reimburse providers:

1. **PPO Dentist:**
These in-network dentists agreed to accept lower reimbursement for services so members save the most money.
2. **Premier Dentist:**
These in-network dentists also accept discounted reimbursement for services, but their discount is not as steep.
3. **Out-of-Network Dentist:**
These dentists have not agreed to discount their rates for service, so members who see an out-of-network dentist will have the highest out-of-pocket costs.



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Tier 3 Rates	Premium/Month
Employee	\$35.75
Employee + 1	\$71.35
Employee + 2 or more	\$100.97

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ASO

	Mature Claims	Administration Fee
Year 1-3	\$50.05	\$2.49
Year 4	\$52.56	\$2.49
Year 5	\$55.97	\$2.49

Administration Fee is guaranteed for 5 years

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