

## Delta Dental of Arkansas

### Dental Benefit Highlights for Heifer Project International

*Coverage Effective January 01, 2016*

| Delta Dental<br>PPO Plus Premier              | PPO<br>Dentist<br><br>Plan Pays | Premier<br>Dentist<br><br>Plan Pays | Non-participating<br>Dentist<br><br>Plan Pays* |
|---|---------------------------------|-------------------------------------|--|
| <b>A - Diagnostic and Preventive Services</b> |                                 |                                     |  |
| Cleanings                                     | 100%                            | 100%                                | 90%  |
| Exams   | 100%                            | 100%                                | 90%  |
| Fluoride                                      | 100%                            | 100%                                | 90%  |
| Sealants                                      | 100%                            | 100%                                | 90%  |
| Bitewing X-rays                               | 100%                            | 100%                                | 90%  |
| Full Mouth X-rays                             | 100%                            | 100%                                | 90%  |
| <b>B - Basic Restorative Services</b>         |                                 |                                     |  |
| Space Maintainers                             | 80%                             | 80%                                 | 72%  |
| Emergency Palliative Treatment                | 80%                             | 80%                                 | 72%  |
| Simple Extractions                            | 80%                             | 80%                                 | 72%  |
| Fillings                                      | 80%                             | 80%                                 | 72%  |
| Endodontics                                   | 80%                             | 80%                                 | 72%  |
| Non-surgical Periodontics                     | 80%                             | 80%                                 | 72%  |
| Surgical Periodontics                         | 80%                             | 80%                                 | 72%  |
| Oral Surgery                                  | 80%                             | 80%                                 | 72%  |
| <b>C - Major Restorative Services</b>         |                                 |                                     |  |
| Crowns  | 50%                             | 50%                                 | 45%  |
| Bridges                                       | 50%                             | 50%                                 | 45%  |
| Dentures                                      | 50%                             | 50%                                 | 45%  |
| Endosteal Implants                            | 50%                             | 50%                                 | 45%  |
| <b>D - Riders</b>                             |                                 |                                     |  |
| Orthodontia                                   | 50%                             | 50%                                 | 45%  |
| Orthodontia Age Limit                         | None                            |                                     |  |
| <b>Maximums and Deductibles</b>               |                                 |                                     |  |
| Annual Maximum                                | \$1,500                         |                                     |  |
| Annual Maximum Carryover                      | Maximum: \$375                  | Threshold: \$749                    |  |
| Orthodontia Lifetime Maximum                  | \$1,000                         |                                     |  |
| Deductible: \$25                              | Limit: 3x                       | Applies to: B & C                   |  |
| Dependent Age Limit                           | 26                              |                                     |  |

*\*When you receive services from a Non-participating Dentist, the percentages in this column indicate the portion of Delta Dental's Non-participating Dentist Fee that will be paid for those services. The Non-participating Dentist Fee may be less than what your dentist charges and you are responsible for that difference.*