



Maricopa County Office of Health Promotion & Education

Group # 4715

Delta Dental PPO Plus Premier Provider Network

Benefits Effective: March 1, 2016

Covered Services	Delta Dental		Non Delta Dental Dentist
	PPO Dentist	Premier Dentist	
<b>Annual Benefit Maximum</b> (Combination of in and out-of-network)	<b>\$3,500</b>	<b>\$3,500</b>	
<b>Routine Services</b>			
<b>Diagnostic:</b> <b>Exams, evaluations or consultations:</b> Two (2) in a benefit year <b>X-rays:</b> Full Mouth/Panorex or vertical bitewings (Once in a three (3) year period) Bitewing (Two (2) in a benefit year)   Periapicals <b>Preventive:</b> <b>Routine Cleanings:</b> Limited to two (2) in a benefit year, or one difficult cleaning may be exchanged for one routine cleaning. However, the difficult cleaning is limited to not more than once in a five (5) year period.	100%	100%	
<b>Basic Services</b>			
<b>Restorative:</b> <b>Fillings:</b> Silver amalgam & for front teeth only, synthetic tooth color fillings (Once per surface every two (2) years) <b>Endodontics:</b> Root Canal Treatment (Permanent Teeth)   Pulpotomy (Primary (baby) Teeth) <b>Periodontics: Treatment of Gum Disease:</b> Periodontal Maintenance - Limited to two (2) in a benefit year Non-surgical - Once every two (2) years   Surgical - Once every three (3) years <b>Oral Surgery:</b> Simple and Surgical Extractions <b>Emergency (Palliative Treatment):</b> Treatment for the relief of pain	100%	100%	
<b>Major Services</b>			
<b>Restorative:</b> Crowns   Onlays- five (5) year waiting period for replacement last performed. <b>Prosthodontics:</b> Bridges   Partial Dentures   Complete Dentures - five (5) year waiting period for replacement last performed. <b>Bridge &amp; Denture Repair:</b> Repair of such appliances to their original condition including relining of dentures. <b>Implants:</b> Implants are only a benefit to replace a single missing tooth, bounded by teeth on each side. Limited to a maximum of <b>\$1,000</b> per tooth, per lifetime & is applied toward the patient's annual maximum.	100%	100%	

Predetermination recommended for services over \$250.

**BENEFITS SUBJECT TO ALL PROVISIONS, TERMS & CONDITIONS OF THE GROUP CONTRACT**

You are enrolled in a Delta Dental PPO plus Premier plan. You and your family members may visit any licensed dentist. There are three levels of dentists to choose from:

- **PPO Dentist** – Payment is based on the PPO dentist’s allowable fee, or the actual fee charged, whichever is less.
- **Premier Dentist** – Payment is based on the Premier Maximum Reimbursable Amount (MRA), filed fee, or the fee actually charged, whichever is less.
- **Non-Participating Dentist** – Payment is based on the non-participating dentist Table of Allowance. Members are responsible for the difference between the non-participating dentist Table of Allowance and the full fee charged by the dentist.

To Find a Dentist – [www.deltadentalaz.com](http://www.deltadentalaz.com) Customer Service Phone # 1.800.352.6132