

Keep Smiling

Delta Dental PPO™



Save with PPO

Visit a dentist in the PPO¹ network to maximize your savings.² These dentists have agreed to reduced fees, and you won't get charged more than your expected share of the bill.³ Find a PPO dentist at deltadentalins.com/ccsf.

Set up an online account

Get information about your plan, check benefits and eligibility information, find a network dentist and more. Sign up for an online account at deltadentalins.com/ccsf.

Check in without an ID card

You don't need a Delta Dental ID card when you visit the dentist. Just provide your name, birth date and enrollee ID or Social Security number. If your family members are covered under your plan, they'll need your information. Prefer to have an ID card? Simply log in to your account to view or print your card.

Coordinate dual coverage

If you're covered under two plans, ask your dental office to include information about both plans with your claim — we'll handle the rest.

Understand transition of care

Generally, multi-stage procedures are covered under your current plan only if treatment began after your plan's effective date of coverage.⁴ Log in to your online account to find this date.

Get a cost estimator

Budget for dental expenses with the Cost Estimator. Go to deltadentalins.com/ccsf, log in to **Online Services** and click on **Cost Explorer** by your name. You'll get a cost estimate personalized to your benefits, including maximums and deductibles, and you can compare the cost of the same procedure at different dentists.

Save with a PPO dentist



PPO



NON-PPO



NON-DELTA DENTAL

¹ In Texas, Delta Dental Insurance Company provides a dental provider organization (DPO) plan.

² You can still visit any licensed dentist, but your out-of-pocket costs may be higher if you choose a non-PPO dentist. Network dentists are paid contracted fees.

³ You are responsible for any applicable deductibles, coinsurance, amounts over annual or lifetime maximums and charges for non-covered services. Out-of-network dentists may bill the difference between their usual fee and Delta Dental's maximum contract allowance.

⁴ Applies only to procedures covered under your plan. If you began treatment prior to your effective date of coverage, you or your prior carrier is responsible for any costs. Group- and state-specific exceptions may apply. If you are currently undergoing active orthodontic treatment, you may be eligible to continue treatment under Delta Dental PPO. Review your Evidence of Coverage, Summary Plan Description or Group Dental Service Contract for specific details about your plan.

Benefit Highlights

Delta Dental PPO™

For: **San Francisco Health Service System**
(Retirees)

Group No: **01673**

Effective Date: **1/1/2021**

Eligibility	Primary enrollee, spouse (or domestic partner) and eligible dependent children to the end of the month that dependent turns age 26		
Deductibles	Delta Dental PPO dentists:	None	
	Non-Delta Dental PPO dentists:	\$75 per person each calendar year \$150 per family each calendar year	
	Deductibles waived for Diagnostic & Preventive (D&P) Services		
Maximum	\$1,250 per person each calendar year		
	Diagnostic & Preventive (D&P) Services do not count toward maximum		
Waiting Periods	Basic Services	Major Services	Prosthodontics
	None	None	None

Benefits and Covered Services*	Delta Dental PPO dentists**	Non-Delta Dental dentists**
Diagnostic & Preventive Services (D&P) Exams, cleanings and x-rays	100%	80%
Basic Services Fillings, posterior composites and sealants	80%	80%
Periodontics (gum treatment)	80%	80%
Oral Surgery	80%	80%
Endodontics (root canals)	60%	50%
Major Services Crowns, inlays, onlays and cast restorations	60%	50%
Prosthodontics Bridges, dentures and implants	60%	50%
Night Guards <i>Limited to one within a 3-year period</i>	80%	80%
Nitrous Oxide	80%	80%
Non-IV Sedation	80%	80%

SmileWay Wellness Benefits***

Your dental plan offers expanded coverage if you have been diagnosed with diabetes, heart disease, HIV/AIDS, rheumatoid arthritis or stroke.

Here's how opting in can help you:

- 100% coverage for one periodontal scaling and root planing procedure per quadrant every year
- 100% coverage for four of the following (any combination) every year:
 - teeth cleaning
 - periodontal maintenance procedure
 - scaling in presence of moderate or severe gingival inflammation

* Limitations or waiting periods may apply for some benefits; some services may be excluded from your plan. Reimbursement is based on Delta Dental contract allowances and not necessarily each dentist's actual fees.

** Reimbursements based on PPO contracted fees for PPO dentists, Premier contracted fees for Premier dentists and program allowance for non-Delta Dental dentists.

*** SmileWay Wellness Benefits are not subject to the Benefit Year Deductibles or Maximums. The terms and conditions outlined in the Evidence of coverage apply.

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Customer Service
888-335-8227

Claims Address
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Sacramento, CA 95899-7330

deltadentalins.com/ccsf

This benefit information is not intended or designed to replace or serve as the plan's Evidence of Coverage or Summary Plan Description. If you have specific questions regarding the benefits, limitations or exclusions for your plan, please consult your company's benefits representative.