

**IBEW LOCAL 595 HEALTH & WELFARE PLAN ACTIVE
AND RETIREE 2021 DENTAL PLAN COMPARISON**

| | DELTA DENTAL - ACTIVE | DELTA DENTAL - RETIREE | UNITED HEALTHCARE DENTAL Former Pacific Union Dental \ (PUD) |
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| HOW DOES YOUR PLAN WORK? | Delta Dental PPO is a fee-for service program with freedom to choose any dentist. The Program pays a percentage for covered services; if you use a PPO Dentist, your out-of-pocket expenses are likely to decrease. Read your evidence of coverage benefits as well as the exclusions and limitations. | Delta Dental PPO is a fee-for service program with freedom to choose any dentist. The Program pays a percentage for covered services; if you use a PPO Dentist, your out-of-pocket expenses are likely to decrease. Read your evidence of coverage benefits as well as the exclusions and limitations. | United Healthcare Dental contracts with local dental professionals to provide services to you and your eligible dependants at no cost or for a low fixed co-payment. |
| WHO IS COVERED? | Primary enrollee, spouse and domestic partner and eligible dependent children of enrollee and spouse only to age 26. | Primary enrollee, spouse and domestic partner and eligible dependent children of enrollee and spouse only to age 26. | Primary enrollee, spouse and domestic partner and eligible dependent children of enrollee and spouse only to age 26. |
| DEDUCTIONS & BENEFIT MAXIMUM | \$25 Individual or \$75 Family deductible per calendar year. Preventive services from a PPO dentist are exempt from this deductible. The maximum benefit paid per calendar yr is \$2,000 per person | 25 Individual or \$75 Family deductible per calendar year. Preventive services from a PPO dentist are exempt from this deductible. The maximum benefit paid per calendar yr is \$2,000 per person | No yearly maximums |
| DIAGNOSTIC & PREVENTATIVE BENEFITS *oral examinations cleanings, x-rays, biopsy/tissue examinations, fluoride treatment space maintainers, specialist consultation. | 100% of Delta's Contract Allowance | 100% of Delta's Contract Allowance | No charge |
| BASIC BENEFITS Oral Surgery (extractions), filings, root canals, periodontal (gum) treatment, sealants, oral surgery (extractions), tissue removal (biopsy) | 80% of Delta's Contract Allowance | 80% of Delta's Contract Allowance | No charge |
| CROWNS, OTHER CAST RESTORATIONS Crowns, inlays, onlays and cast restorations | 80% of Delta's Contract Allowance | 80% of Delta's Contract Allowance | No charge |
| PROSTHODONTIC BENEFITS Bridges, partial dentures, full dentures, | 80% of Delta's Contract Allowance | 80% of Delta's Contract Allowance | No charge |
| ORTHODONTIC BENEFITS* *For adults and dependent children w/UHC Dental available to dependants only between ages of 10 & 19 *Delta Dental only covers children to the age of 19. | 80% of Delta's Contract Allowance (subject to a \$2,500 lifetime maximum per person) | 80% of Delta's Contract Allowance (subject to a \$2,500 lifetime maximum per person) | One-time surcharge of \$750 \$350 start-up fees \$150 for 1-set retainers |