

# DELTA DENTAL PPO<sup>SM</sup> CLASSIC Plans – Region 4 (All Other Regions, CA) Plan Year 2010

For groups with 5-49 eligible employees

This region includes zip codes 92222, 92227, 92231-92233, 92243-92244, 92249-92251, 92257, 92259, 92266, 92273, 92275, 92281, 92283, 92328, 92384, 92389, 93013-93014, 93067, 931, 934, 93512-93515, 93517, 93522, 93526, 93529-93530, 93541-93542, 93545-93546, 93549, 939, 942, 94503, 94508, 94510, 94512, 94515, 94533-94535, 94558-94559, 94562, 94567, 94571, 94573-94574, 94576, 94581, 94585, 94589-94592, 94599, 94922-94923, 94926-94928, 94931, 94951-94955, 94972, 94975, 94999, 950, 954-955, 95646, 95724, 95728, 959-961

| Summary of Benefits <sup>1</sup> (No waiting period for any procedure)                                                                                                                                                      |                             |                |                               |                |                               |                |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|----------------|-------------------------------|----------------|-------------------------------|----------------|
| Plan                                                                                                                                                                                                                        | PPO A                       |                | PPO B                         |                | PPO C                         |                |
|                                                                                                                                                                                                                             | PPO In/PPO Out <sup>2</sup> |                | PPO Plus Premier <sup>3</sup> |                | PPO Plus Premier <sup>3</sup> |                |
|                                                                                                                                                                                                                             | In-Network                  | Out-of-Network | In-Network                    | Out-of-Network | In-Network                    | Out-of-Network |
| Diagnostic & Preventive <sup>4</sup>                                                                                                                                                                                        | 100%                        | 100%           | 70%                           | 50%            | 100%                          | 100%           |
| Basic (fillings, oral surgery, root canals perio and sealants)                                                                                                                                                              | 80%                         | 80%            | 70%                           | 50%            | 80%                           | 80%            |
| Crowns, cast restorations and prosthodontics <sup>5</sup>                                                                                                                                                                   | 50%                         | 50%            | 50%                           | 50%            | 60%                           | 50%            |
| Calendar Year Deductible                                                                                                                                                                                                    | \$50                        |                | None                          |                | \$25                          | \$50           |
| Calendar Year Maximum                                                                                                                                                                                                       | \$1,000, \$1,500 or \$2,000 |                | \$1,000, \$1,500 or \$2,000   |                | \$1,000, \$1,500 or \$2,000   |                |
| Orthodontics (children only) <sup>6</sup>                                                                                                                                                                                   | 50%                         |                | 50%                           |                | 50%                           | 50%            |
| Orthodontics Lifetime Maximum (per patient)                                                                                                                                                                                 | \$1,000                     |                | \$1,000                       |                | \$1,000                       |                |
| Diagnostic & Preventive Maximum Waiver <sup>®</sup>                                                                                                                                                                         | Optional                    |                | Optional                      |                | Optional                      |                |
| Rates (Without orthodontics)                                                                                                                                                                                                |                             |                |                               |                |                               |                |
|                                                                                                                                                                                                                             | Level 1                     | Level 2        | Level 1                       | Level 2        | Level 1                       | Level 2        |
|                                                                                                                                                                                                                             | \$1,000 Maximum             |                |                               |                |                               |                |
| One Party                                                                                                                                                                                                                   | \$37.87                     | \$45.42        | \$34.90                       | \$44.88        | \$48.17                       | \$57.77        |
| Two Party                                                                                                                                                                                                                   | \$75.69                     | \$90.85        | \$69.25                       | \$83.11        | \$96.27                       | \$115.56       |
| Three Party +                                                                                                                                                                                                               | \$117.11                    | \$140.56       | \$100.03                      | \$120.03       | \$148.97                      | \$178.77       |
|                                                                                                                                                                                                                             | \$1,500 Maximum             |                |                               |                |                               |                |
| One Party                                                                                                                                                                                                                   | \$44.47                     | \$53.38        | \$41.07                       | \$49.29        | \$56.57                       | \$67.88        |
| Two Party                                                                                                                                                                                                                   | \$88.96                     | \$106.71       | \$80.90                       | \$97.07        | \$113.10                      | \$135.75       |
| Three Party +                                                                                                                                                                                                               | \$137.62                    | \$165.16       | \$113.27                      | \$135.93       | \$175.05                      | \$210.06       |
|                                                                                                                                                                                                                             | \$2,000 Maximum             |                |                               |                |                               |                |
| One Party                                                                                                                                                                                                                   | \$49.00                     | \$58.80        | \$44.28                       | \$53.13        | \$62.66                       | \$75.19        |
| Two Party                                                                                                                                                                                                                   | \$97.67                     | \$117.19       | \$86.78                       | \$104.14       | \$124.74                      | \$149.68       |
| Three Party +                                                                                                                                                                                                               | \$148.66                    | \$178.39       | \$119.73                      | \$143.71       | \$189.87                      | \$227.84       |
| Rates (With \$1,000 Child orthodontic lifetime maximum)                                                                                                                                                                     |                             |                |                               |                |                               |                |
|                                                                                                                                                                                                                             | Level 1                     | Level 2        | Level 1                       | Level 2        | Level 1                       | Level 2        |
|                                                                                                                                                                                                                             | \$1,000 Maximum             |                |                               |                |                               |                |
| One Party                                                                                                                                                                                                                   | \$37.87                     | \$45.42        | \$34.90                       | \$41.88        | \$48.17                       | \$57.77        |
| Two Party                                                                                                                                                                                                                   | \$77.47                     | \$92.90        | \$71.10                       | \$85.27        | \$98.01                       | \$117.57       |
| Three Party +                                                                                                                                                                                                               | \$135.04                    | \$162.06       | \$118.85                      | \$142.58       | \$166.53                      | \$199.82       |
|                                                                                                                                                                                                                             | \$1,500 Maximum             |                |                               |                |                               |                |
| One Party                                                                                                                                                                                                                   | \$44.47                     | \$53.38        | \$41.07                       | \$49.29        | \$56.57                       | \$67.88        |
| Two Party                                                                                                                                                                                                                   | \$90.67                     | \$108.80       | \$82.74                       | \$99.25        | \$114.83                      | \$137.80       |
| Three Party +                                                                                                                                                                                                               | \$155.55                    | \$186.65       | \$132.08                      | \$158.44       | \$192.59                      | \$231.11       |
|                                                                                                                                                                                                                             | \$2,000 Maximum             |                |                               |                |                               |                |
| One Party                                                                                                                                                                                                                   | \$49.00                     | \$58.80        | \$44.28                       | \$53.13        | \$62.66                       | \$75.19        |
| Two Party                                                                                                                                                                                                                   | \$99.37                     | \$119.29       | \$88.63                       | \$106.31       | \$126.47                      | \$151.71       |
| Three Party +                                                                                                                                                                                                               | \$166.60                    | \$199.88       | \$138.54                      | \$166.20       | \$207.41                      | \$248.88       |
| Additional Information                                                                                                                                                                                                      |                             |                |                               |                |                               |                |
| <b>Required employee participation:</b> If employer contributes 100% of the cost, 100% of eligible employees must enroll.<br>If employer contributes 75%-99% of the cost, minimum of 80% of eligible employees must enroll. |                             |                |                               |                |                               |                |
| <b>Rate guarantee:</b> One year for groups enrolling no later than December 1, 2010.                                                                                                                                        |                             |                |                               |                |                               |                |
| <b>Broker commission:</b> These rates include 10% flat broker commission and any applicable miscellaneous broker compensation.                                                                                              |                             |                |                               |                |                               |                |

- <sup>1</sup> Please refer to the marketing brochure for additional information on benefit copayments, deductibles, maximums, limitations & exclusions and enrollment guidelines. See back side of this sheet for a list of eligible Level 1 and Level 2 industries and a list of ineligible industries.
- <sup>2</sup> All dentists (in-network and out-of-network) are reimbursed at the lesser of the submitted charge or the PPO provider allowed fee.
- <sup>3</sup> Delta Dental PPO dentists are reimbursed at the lesser of the submitted charge or the PPO provider allowed fee. Delta Dental Premier dentists are reimbursed at the lesser of the submitted charge or the Premier provider allowed fee. Non-contracted dentists are reimbursed at the lesser of the submitted charge or the fee that satisfies the majority of dentists with the same training and geographical area.
- <sup>4</sup> If the enrollee is pregnant, Delta Dental will pay for the following additional services per calendar year: one additional oral evaluation and either one additional routine cleaning or one additional periodontal scaling and root planing per quadrant.
- <sup>5</sup> Includes surgical placement and removal of implants, implant supported prosthetics and implant repair and recementation.
- <sup>6</sup> Requires a minimum enrollment of 10 primary enrollees.

## Eligible/Ineligible Industries – Delta Dental PPO

### Eligible Industries

| Level One                                                  | SIC code                                   |
|------------------------------------------------------------|--------------------------------------------|
| Advertising (except Misc. not classified #7319)            | 7311-7313                                  |
| Agriculture, Forestry, Fishing (except seasonal employees) | 0100-0999                                  |
| Auto Rental Agencies                                       | 7513-7519                                  |
| Automobile Parking Services                                | 7521                                       |
| Building Maintenance/Equipment Rental                      | 7349-7359                                  |
| Collection Agencies & Credit Reporting Services            | 7322-7323                                  |
| Communication (Radio, Telephone, TV/Radio Broadcasting)    | 4800-4899                                  |
| Community Service Organizations/Social Services            | 8300-8499                                  |
| Computer Programming & Related Services                    | 7371-7379                                  |
| Construction Contractors                                   | 1500-1799                                  |
| Direct Mailing, Reproductions, Secretarial Services        | 7331-7338                                  |
| Disinfecting & Pest Control Services                       | 7342                                       |
| Electrical Repair (Radio, TV, A/C, Refrigerator)           | 7622-7629                                  |
| Engineering & Management Services                          | 8711-8748                                  |
| Finance (Banks, Securities, Credit Agencies)               | 6000-6299                                  |
| Funeral Services & Crematories                             | 7261                                       |
| Furniture Repair/Reupholstery                              | 7641                                       |
| Government-Funded Groups                                   | 8300-8499                                  |
| Hospitals                                                  | 8062-8069                                  |
| Independent Auto Repair & Services                         | 7532-7599                                  |
| Laundry/Garment Services/Shoe Repair Shops                 | 7211-7219/7251                             |
| Manufacturing (except Jewelry Manufacturing)               | 2000-2699                                  |
| Manufacturing (Chemicals, Allied and Other Products)       | 2810-3999                                  |
| Mining, Oil and Gas Extraction                             | 1000-1499                                  |
| Misc. Computer Services                                    | 7379                                       |
| Misc. Repair (Welding, etc.)                               | 7692-7699                                  |
| Museum Art Galleries & Gardens                             | 8412, 8422                                 |
| News Syndicates                                            | 7384, 7383                                 |
| Photofinishing Labs                                        | 7384                                       |
| Printing & Publishing                                      | 2700-2799                                  |
| Public and Private Schools (Elementary & High School)      | 8200-8299                                  |
| Public Administration (Cities, Counties, Police, etc.)     | 9000-9720, 9722-9998                       |
| Retail                                                     | 5200-5510, 5610-5699, 5712-5736, 5912-5999 |
| Transportation                                             | 4000-4799                                  |
| Security Systems, Detectives, Armored Cars                 | 7381-7382                                  |
| Utilities                                                  | 4900-4999                                  |
| Wholesale Trade                                            | 5000-5199                                  |

| Level Two                                               | SIC code              |
|---------------------------------------------------------|-----------------------|
| Advertising, Misc. not classified                       | 7319                  |
| Amusement, Recreation & Entertainment                   | 7800-7999             |
| Auto Dealerships                                        | 5511-5599             |
| Churches (Management and Administrative staff ONLY)     | 8661                  |
| Hotels                                                  | 7000-7099             |
| Insurance Carriers/Brokers                              | 6300-6499             |
| Jewelry Manufacturing                                   | 3911-3915             |
| Legal                                                   | 8100-8199             |
| Management Carve-out (regardless of industry)           | 9999                  |
| Medical Groups                                          | 8000-8059 & 8082-8099 |
| Photographic Studios                                    | 7221                  |
| Real Estate                                             | 6500-6799             |
| Restaurants                                             | 5800-5899             |
| Tax Return Preparation Services/Misc. Personal Services | 7291-7299             |
| Watch, Clock & Jewelry Repair                           | 7631                  |
| Industries quoted as Level 2 in 2008                    | 0000                  |

| Ineligible Industries                               | SIC code         |
|-----------------------------------------------------|------------------|
| Associations and Trusts <sup>1</sup> (except #8661) | 8600-8699        |
| Beauty & Barber Shops                               | 7231-7241        |
| Dentist offices, Dental Labs and Medical Labs       | 8021, 8071, 8072 |
| Employment Agencies                                 | 7361-7363        |
| High Turnover <sup>2</sup>                          | Varies           |
| International Affairs                               | 9721             |
| Misc. Business Services                             | 7389             |
| Misc. Services not elsewhere classified             | 8999             |
| Partnerships                                        | No SIC           |
| Private Households                                  | 8811             |
| Religious Organizations (except Churches #8661)     | No SIC           |
| Seasonal Employees (Christmas/Part-time help)       | No SIC           |
| Seasonal Employees (Agriculture)                    | 0761-0783        |

<sup>1</sup> Management and the Administrative staff of Associations and Trusts are eligible under Level 1. Use SIC Code 8741.

<sup>2</sup> A business has "high turnover" if 20% or more of the average number of its employees during the past 12 months were newly hired for reasons other than the growth of the business.