

## **DENTAL PLAN COMPARISONS - 2021**

Information below	Delta Dental of Washington Service <sup>†</sup> (PPO)	Delta Care (DMO)* Must select a primary dentist in network	Willamette Dental (DMO)** Must go to a Willamette Clinic for coverage
Deductible Member / family	\$50 / \$150 In-Network \$100 / \$300 Out of network	N/A	N/A
	WDS: Percent indicated is the amount insurance will pay	Amounts listed are what subscriber pays for basic services. Subscriber will pay additional costs associated with optional treatments (e.g. amalgam is basic, porcelain is optional). Refer to the COC for full details.	Amounts listed are what subscriber pays
Preventative coverage	100% In-Network 100% Out of network	Preventative: Paid in full Problem focused: \$15	\$15 per visit
Simple extractions, surgical, fillings, and root canals	90% In-Network 80% Out of network	Routine Extraction: \$30 Surgical Extraction: Paid in full Fillings: Paid in full Anesthesia: Local paid in full; General: Only for children 6 &	Routine Extraction: Paid in full Surgical Extraction: \$50 co-pay per tooth Fillings: Paid in full Anesthesia: \$250
Crowns and bridges	60% In-Network 50% Out of network	younger Crowns: \$125 - \$239 Bridges: \$70 - \$212 Dentures: \$305	Crowns: \$120 Bridges: per tooth, \$120 Dentures: \$170
		Root Canal \$0 - \$125 Osseous Surgery – Paid in full Root Planing – \$35	Root Canal \$50 - \$100 Osseous Surgery – \$140 Root Planing – Paid in full
Annual Maximum	\$2,000 per person	Unlimited	Unlimited
Orthodontia Lifetime Maximum	For eligible children \$1,500 lifetime maximum	Unlimited for children and adults after \$1200 - \$1600 co-pay	Pre-Orthodontic Service - \$150 Unlimited for both adults and children after \$500
Annual Rates: Employee Employee & Spouse Employee & Child(ren) Employee & Family	\$ 643 \$ 1,318 \$ 1,298 \$ 1,972	\$ 385 \$ 769 \$ 1,229 \$ 1,614	\$ 839 \$ 1,695 \$ 1,721 \$ 2,686

<sup>\*</sup>Delta Care is a DMO provided by Delta Dental of Washington. Providers are private practice dentists who have agreed to the Delta Care contract. You <u>must</u> select a primary dentist prior to seeking services by calling (800) 650-1583.

<sup>\*\*</sup>Willamette Dental coverage is only available through Willamette Clinics. If you go to another facility or dentist there will be no coverage.