

Plan Benefit Highlights for: Rose Tree Media School District
Group No: 02277

Eligibility	Primary enrollee, spouse and eligible dependent children to the end of the year dependent turns age 19 or to the end of the year dependent turns age 23 if dependent is full-time student			
Deductibles	None			
Maximums	\$1,000 per person each plan year (7/1 -6/30)			
D & P counts toward maximum?	Yes			
Waiting Period(s)	Basic Benefits None	Major Benefits None	Prosthodontics None	Orthodontics None

Benefits and Covered Services*	Delta Dental PPO dentists**	Non-Delta Dental PPO dentists**
Diagnostic & Preventive Services (D & P) Exams, cleanings, x-rays and sealants to age 14	100 %	100 %
Basic Services Fillings, denture repair and simple tooth extractions	100 %	100 %
Endodontics (root canals) Covered Under Basic Services	100 %	100 %
Periodontics (gum treatment) Covered Under Major Services	50 %	50 %
Oral Surgery Covered Under Basic Services	100 %	100 %
Major Services Crowns, inlays, onlays and cast restorations	50 %	50 %
Prosthodontics Bridges, dentures and implants	50 %	50 %
Orthodontic Benefits Dependent children to age 20	50 %	50 %
Orthodontic Maximums	\$1,600 Lifetime	\$1,600 Lifetime

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

** Reimbursement is based on PPO contracted fees for PPO dentists, Premier contracted fees for Premier dentists and Premier contracted fees for non-Delta Dental dentists.

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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.