

Plan Features	DMO Plan 100/100/601		PPO	
	Dual Option DMO - Current		Dual Option PPO - 80th Allowed	
	In		In	Out
Deductible Applies To	N/A		Basic and Major	Basic and Major
Deductible (Ind/Fam)	N/A / N/A		\$50 / \$150	\$50 / \$150
Virtual Dental Visit	N/A		1st exam using virtual vendors fully covered; no limits apply	N/A
Preventive/Diagnostic Services	100%		100%	100%
Basic Services	100%		90%	90%
Major Services	60%		80%	80%
Annual Benefit Max	N/A		\$2,000	\$2,000
Office Visit Copay	\$5		N/A	N/A
Ortho Applies To	Child Only		Adult/Child	Adult/Child
Orthodontic Services	60%		50%	50%
Orthodontic Lifetime Max	N/A		\$2,000	\$2,000
Work In Progress Exclusion	See DMO Schedule		Exclusion Applies	Exclusion Applies
Implants	60%		0%	0%
R&C	N/A		N/A	80% - Allowed
Partial List of Plan Provisions				
Root Canal Therapy	60%		90%	90%
Osseous Surgery	60%		90%	90%
Removal of Impacted Tooth	60%		90%	90%
General Anesthesia	60%		90%	90%
Posterior Composite	See DMO Schedule		Not Covered	Not Covered
Prosthetic Replacement	See DMO Schedule		8 years	8 years
Fluoride Age Limit	See DMO Schedule		To age 19	To age 19
Sealant Age Limit	See DMO Schedule		To Age 16	To Age 16
Non-surgical TMJ Services	See DMO Schedule		Not Covered	Not Covered
Missing Tooth Exclusion	See DMO Schedule		Exclusion Applies	Exclusion Applies
	Lives	Rates	Lives	Rates
EE	35	\$36.38	149	\$55.90
EE + SP	6	\$89.14	97	\$111.79
EE + Children	5	\$81.14	29	\$131.15
Family	14	\$108.79	147	\$195.64
Total	60	\$3,737	422	\$51,735