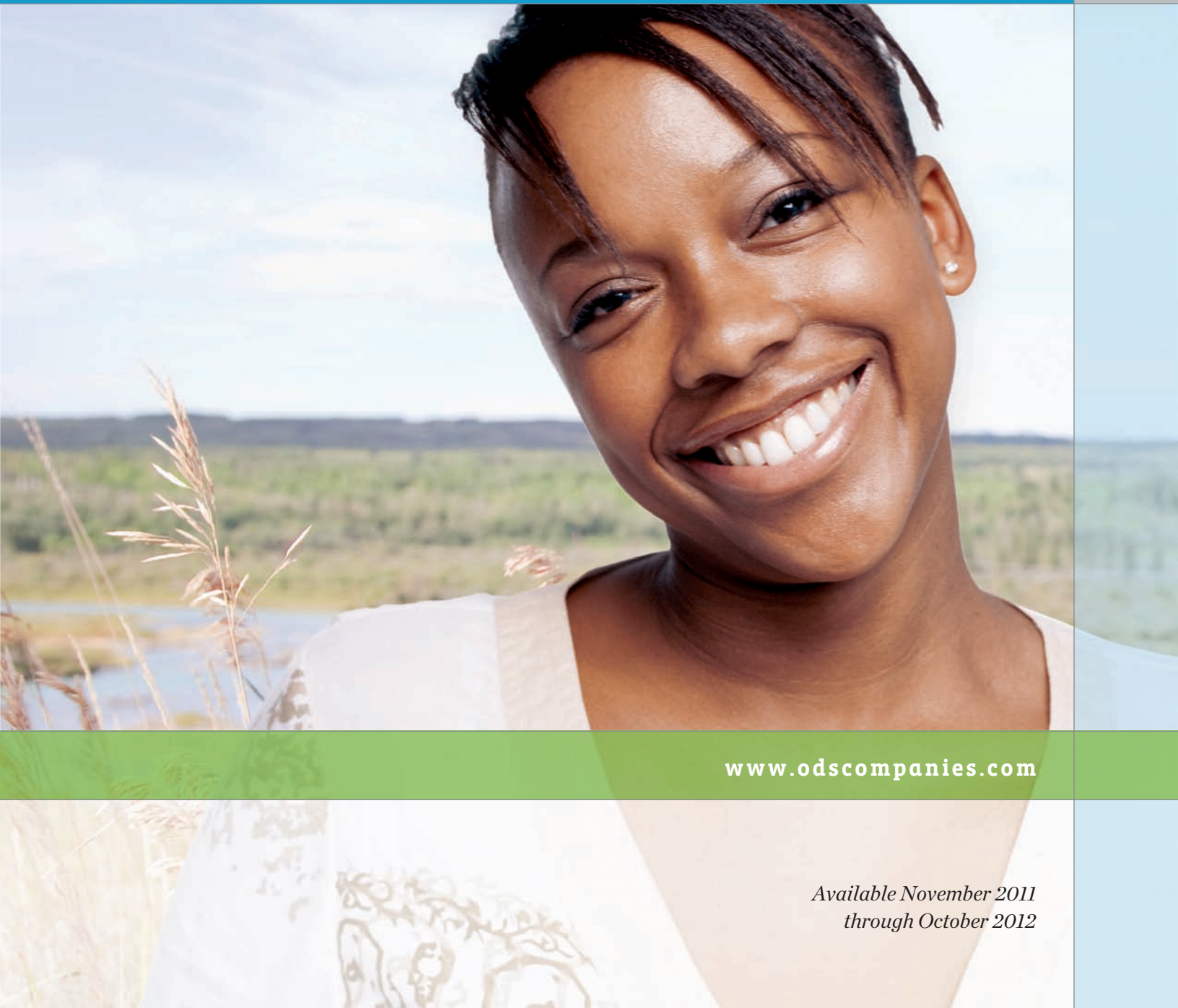




► Individuals and families

DENTAL BENEFIT PLANS



www.odscorporations.com

*Available November 2011
through October 2012*

Individual dental plans protect your total health

Wherever you go, ODS goes with you — along with the nation’s largest dental network, Delta Dental. With ODS individual plans, you can choose from two Delta Dental plan options: Delta Dental Premier and Delta Dental PPO. You are eligible to enroll in one of our dental plans if you are an Oregon resident and live in Oregon at least six months out of the year.

DELTA DENTAL PREMIER

This popular, traditional fee-for-service product offers members access to the largest dental network available in Oregon and across the nation. Members can save money by seeking care from participating Delta Dental Premier providers.

- Indemnity plan — any licensed dentist is eligible
- Deductible waived for Class 1 services
- Delta Dental Premier network includes more than 90 percent of all dentists in Oregon
- More than 2,000 participating providers

DELTA DENTAL PPO

Like the Delta Dental Premier plan, this preferred provider option offers access to the largest PPO network in Oregon and across the country.

- PPO plan — better benefits using PPO network dentists
- Deductible waived for Class 1 services rendered by a participating PPO dentist
- Largest PPO dental network in the state
- More than 600 participating providers

Oral Health, Total Health

Oral health research has shown a strong link between oral health and overall health. ODS believes when you see your dentist regularly and maintain a healthy mouth, you can help keep the rest of your body healthy, too.

Through our Oral Health, Total Health program, ODS offers additional preventive benefits to diabetics and pregnant women in their third trimester. ODS also provides other evidence-based dental benefits, including routine oral cancer exams and coverage for ViziLite Plus TBlue and brush biopsy, two non-surgical screenings designed to aid in the early detection of abnormal cells in the mouth.

DENTAL LIMITATIONS AND EXCLUSIONS

- ▶ Examinations are limited to once every six months.
- ▶ Bitewing X-rays are limited to once every 12 months.
- ▶ Full mouth X-rays are limited to once every five years.
- ▶ Prophylaxis (cleaning) is limited to once every six months.
- ▶ Fluoride application is limited to once every 12 months to age 19.
- ▶ Surgical placement or removal of implants is not covered.
- ▶ Orthodontic services are not covered.
- ▶ Services for cosmetic reasons are not covered.

This is a benefit summary only. For a complete description of benefits, limitations and exclusions, refer to your policy.

Does my dentist participate in the Delta Dental Premier or Delta Dental PPO networks?

Visit www.odscompanies.com and use our Find Care tool to search for participating dentists in your area.

DELTA DENTAL PREMIER PLAN

SERVICE	BENEFIT
Plan year maximum, per member	\$750: 1st-year benefit maximum \$1,000: 2nd-year benefit maximum \$1,250: 3rd-year benefit maximum
Plan year deductible, per member	\$50
CLASS 1: Routine examinations and prophylaxis (cleanings) once every six months and bitewing X-rays once every 12 months; fissure sealants; fluoride is limited to once every 12 months to age 19 CLASS 2: Six month waiting period. Restorative dentistry (treatment of tooth decay with amalgam, synthetic porcelain and plastic materials); space maintainers CLASS 3: 12 month waiting period. Oral surgery (surgical extractions and certain minor surgical procedures); endodontics and periodontics; crowns; cast restorations; construction or repair of fixed bridges; partials and complete dentures	Premier network
	80%*
	60%
	50%

DELTA DENTAL PREFERRED PROVIDER OPTION (PPO) PLAN

SERVICE	BENEFIT	
Plan year maximum, per member	\$750: 1st-year benefit maximum \$1,000: 2nd-year benefit maximum \$1,250: 3rd-year benefit maximum	
Plan year deductible, per member	\$50	
CLASS 1: Routine examinations and prophylaxis (cleanings) once every six months and bitewing X-rays once every 12 months; fissure sealants; fluoride is limited to once every 12 months to age 19 CLASS 2: Six month waiting period. Restorative dentistry (treatment of tooth decay with amalgam, synthetic porcelain and plastic materials); space maintainers CLASS 3: 12 month waiting period. Oral surgery (surgical extractions and certain minor surgical procedures); endodontics and periodontics; crowns; cast restorations; construction or repair of fixed bridges; partials and complete dentures	PPO network	Non-PPO network
	100%*	80%
	60%	50%
	50%	50%

* Deductible waived

Individual Dental plan highlights

- ✓ Freedom to choose any licensed dentist
- ✓ No waiting periods for Class 1 services
- ✓ Filed-fee savings from participating dentists
- ✓ Increasing maximums
- ✓ Pre-determination of benefits if requested in a pre-treatment plan
- ✓ No claim forms
- ✓ Prompt and accurate claims payment
- ✓ Superior customer service

MONTHLY RATES (For subscribers effective November 2011 – October 2012)

	0-19	20-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60+
INDIVIDUAL										
Delta Dental Premier plan	\$42	\$44	\$44	\$44	\$54	\$54	\$56	\$56	\$56	\$56
Delta Dental PPO plan	38	42	42	42	48	48	53	53	53	53
INDIVIDUAL + SPOUSE										
Delta Dental Premier plan	84	89	89	89	110	110	113	113	113	113
Delta Dental PPO plan	78	84	84	84	94	94	103	103	103	103
INDIVIDUAL + CHILD(REN)										
Delta Dental Premier plan	82	89	89	89	106	106	113	113	113	113
Delta Dental PPO plan	75	82	82	82	93	93	102	102	102	102
INDIVIDUAL + SPOUSE + CHILD(REN)										
Delta Dental Premier plan	122	130	130	130	165	165	168	168	168	168
Delta Dental PPO plan	117	125	125	125	139	139	153	153	153	153

ODS invites you to use the younger spouse as the primary applicant if it will help you receive a lower premium.

ELIGIBILITY REQUIREMENTS:

- You must be an Oregon resident and live in Oregon at least six months out of the year.
- If you move outside Oregon while on this plan, you will automatically be termed the first of the month following your move.
- When you move from our Individual dental plan rider to this plan, you may retain your benefit level as long as there is no lapse in coverage and your application is received within 30 days.

IF YOU TERMINATE FROM THIS PLAN:

- You and/or your covered dependents will not be able to re-apply for two years if you terminate from this plan.
- You and/or your covered dependents will not be able to terminate coverage and re-apply more than two times per lifetime, per insured on either plan.
- Any new enrollment will begin at the first year benefit level.

HOW TO ENROLL:

- Find out if your dentist is part of the Delta Dental Premier or Delta Dental PPO network by visiting www.odskompanies.com. From the homepage, click on **Find Care** and **Search as a Guest**, then select **Dental** as your category.
- Compare plans and benefits to select the dental plan that best meets your coverage and provider needs.
- Review monthly rates to find your premium costs.
- Complete an application and submit to ODS with the initial premium. The application can be found on our website under **Shopping for health insurance**, selecting **Individual** and then **Dental plans**.
- We require complete submission no less than 10 days before the desired effective date in order to process the application.
- The application will be processed if eligibility requirements have been met and you will receive an identification card and member handbook to confirm your enrollment. If eligibility is not met, you will be advised in writing and your premium will be returned.

www.odskompanies.com

601 S.W. Second Ave.
 Portland, OR 97204-3156
 503-243-3973 or 877-277-7073



Insurance products provided by Oregon Dental Service.