El Monte Union HSD Summary of Dental PPO Plans Effective: January 1, 2022 New High/Low PPO Options

Carrier Name	Delta	Delta Dental		Delta Dental	
Effective Date	1/1/	1/1/2022		1/1/2022	
Plan Name	DPPO - Low		DPPO - High		
	Annual Max Roll Over		D&P Waiver		
Network	РРО	Non-PPO	РРО	Non-PPO	
General Plan Information					
Annual Deductible/Individual	\$25	\$25	\$25	\$25	
Annual Deductible/Family	\$75	\$75	\$75	\$75	
Annual Plan Maximum	\$1,500	\$1,250	\$2,250	\$2,000	
Implant Plan Maximum	\$1,500	\$1,500	\$1,500	\$1,500	
Night Guard Maximum	\$500	\$500	\$500	\$500	
Waiting Period	None	None	None	None	
Covered Services					
Diagnostic and Preventive					
Diagnostic and Preventive	70-100%	70-100%	70-100%	70-100%	
			(deductible waived)	(deductible waived)	
Sealants	70-100%	70-100%	70-100%	70-100%	
Basic Services					
Basic	70-100%	70-100%	70-100%	70-100%	
Endodontic Treatment	70-100%	70-100%	70-100%	70-100%	
Periodontic Treatment	70-100%	70-100%	70-100%	70-100%	
Major Services					
Major	70-100%	70-100%	70-100%	70-100%	
Prosthodontics	50%	50%	50%	50%	
Implants	50%	50%	50%	50%	
Orthodontia Services					
Lifetime Maximum	\$1,500	\$1,500	\$1,500	\$1,500	
Orthodontia (Child) - to age 26	50%	50%	50%	50%	
Orthodontia (Adult)	50%	50%	50%	50%	
Night Guard	100%	100%	100%	100%	

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