

Save money and stay in network with Delta Dental

With your Delta Dental PPOSM (Point-of-Service) plan, you may save more money and receive higher levels of coverage when visiting a Delta Dental PPO dentist. Our PPO dentists have agreed to accept lower fees as full payment for covered services. However, if you go to a dentist who doesn't participate in Delta Dental PPO, you can still save money if your dentist participates in Delta Dental Premier[®]. Like our PPO dentists, Delta Dental Premier dentists agree to accept Delta Dental's fee determination as full payment for covered services. To find a participating Delta Dental PPO or Premier dentist, please visit www.deltadentalmi.com.

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|-----------------------|------------------------|--|
| DELTA DENTAL NETWORKS | Delta Dental PPO | <ul style="list-style-type: none"> Most significant network discounts with nearly 1,700 office locations in Michigan¹ Dentists file claims for enrollee No balance billing on covered services |
| | Delta Dental Premier | <ul style="list-style-type: none"> Significant network discounts with more than 5,300 office locations in Michigan¹ Dentists file claims for enrollee No balance billing on covered services |
| OUT-OF-NETWORK | Out-of-network dentist | <ul style="list-style-type: none"> No network discounts May need to file own claims May be balance billed |

¹ Michigan network statistics: Delta Dental of Michigan, April 2012

Examples of how it works:

As shown below, your lowest out-of-pocket costs result from going to either a Delta Dental PPO or Delta Dental Premier dentist.*

| | | DELTA DENTAL PPO DENTIST | DELTA DENTAL PREMIER DENTIST | OUT-OF-NETWORK DENTIST |
|--|---------------------------|--------------------------|------------------------------|------------------------|
| CLASS II BASIC SERVICES CROWN | Submitted fee: | \$950.00 | \$950.00 | \$950.00 |
| | Maximum allowed fee: | \$675.00 | \$898.00 | \$744.00 |
| | Coverage level: | 90% | 80% | 80% |
| | Amount Delta Dental pays: | \$607.50 | \$718.40 | \$595.20 |
| | Amount you pay: | \$67.50 | \$179.60 | \$354.80 |
| | YOUR IN-NETWORK SAVINGS: | \$287.30 | \$175.20 | NONE |
| CLASS III MAJOR SERVICES ENDOSTEAL IMPLANT | Submitted fee: | \$1,900.00 | \$1,900.00 | \$1,900.00 |
| | Maximum allowed fee: | \$1,445.00 | \$1,775.00 | \$1,575.00 |
| | Coverage level: | 50% | 50% | 50% |
| | Amount Delta Dental pays: | \$722.50 | \$887.50 | \$787.50 |
| | Amount you pay: | \$722.50 | \$887.50 | \$1,112.50 |
| | YOUR IN-NETWORK SAVINGS: | \$390.00 | \$225.00 | NONE |

*Payment examples above are illustrative only. Fees and reimbursements can vary by location and dentist. They do however represent how payment is determined.