

# SUMMARY OF BENEFITS (Core Option)



Washington Dental Service is a member of the Delta Dental Plans Association

**HANFORD EMPLOYEES WELFARE TRUST**  
**Washington Dental Service, a Delta Dental Plan**  
**Delta Dental PPO**  
**GROUP NUMBER: 00522**  
**Effective Date: January 1, 2007**

	PAYMENT LEVELS		
	Delta Dental Member PPO Dentist	Delta Dental Member Non-PPO Dentist	Not a Delta Dental Member Dentist
<b>Class I - Diagnostic &amp; Preventive</b> Exams, Prophys, Fluoride, X-rays, Sealants	50%	40%	40%
<b>Class II - Restorative</b> Restorations, Endodontics, Periodontics, Oral Surgery	50%	40%	40%
<b>Class III – Major</b> Crowns, Dentures, Partials, Bridges	30%	20%	20%
<b>Annual Maximum Per Person</b> Benefit Period(January 1 – December 31)	\$1,000	\$1,000	\$1,000
<b>Deductible (Waived on Class I)</b> Per person/per benefit period Annual family maximum	\$50 \$150	\$50 \$150	\$100 \$300
<b>Orthodontia</b> Adults and Dependent Children Lifetime maximum per child	50% \$1,000	50% \$,1000	50% \$1,000

MySmile® is a unique online tool that provides personalized strategies for employees to use to improve their oral health. It is accessed through the Washington Dental Service Web site [www.DeltaDentalWA.com](http://www.DeltaDentalWA.com)

**Please Note:** This is a brief summary of benefits only and does not constitute a contract. You will receive a benefits booklet that completely details your Delta Dental PPO dental benefits. Please feel free to call our Customer Service Department if you have any questions.

**Delta Dental/Washington Dental Service**  
**PO Box 75983**  
**Seattle, WA 98175-0983**  
**Customer Service Toll-free (800) 554-1907**  
**Monday – Friday 8 a.m. to 5 p.m., Pacific Standard Time**  
**Web site: www.DeltaDentalWA.com**