

# University of Richmond

Healthy Smile, Healthy You<sup>®</sup> program included

	Enhanced Option <i>can use PPO™, Premier®, or OON network providers</i>			Base Option <i>can use PPO™, Premier®, or OON network providers</i>		
Plan Design	Delta Dental PPO plus Premier™			Delta Dental PPO™		
Network Categories	PPO	Premier	OON	PPO	Premier	OON
Diagnostic/Preventive <small>(exams, cleanings, fluoride, x-rays, sealants)</small>	100%	100%	70%	100%	100%	70%
Basic Services <small>(fillings, simple extractions)</small>	80% <i>after deductible</i>	80% <i>after deductible</i>	50% <i>after deductible</i>	80% <i>after deductible</i>	80% <i>after deductible</i>	50% <i>after deductible</i>
Major Services <small>(oral surgery, periodontics, endodontics, crowns, dentures, bridges, denture repair &amp; recementation)</small>	50% <i>after deductible</i>	50% <i>after deductible</i>	50% <i>after deductible</i>	0%	0%	0%
Orthodontia <small>(Adult and Child)</small>	50% <i>after deductible</i>	50% <i>after deductible</i>	50% <i>after deductible</i>	0%	0%	0%
Annual Deductible	\$25 individual \$75 family	\$25 individual \$75 family	\$50 individual \$150 family	\$50 individual \$150 family	\$50 individual \$150 family	\$100 individual \$300 family
Maximums						
• Calendar Year	\$2,000	\$2,000	\$2,000	\$1,250	\$1,250	\$1,250
• Lifetime Ortho	\$2,000	\$2,000	\$2,000	Not covered	Not covered	Not covered