

2009 Commercial Group Dental Plan

By virtue of your Group Health Cooperative or Group Health Options, Inc. plan, you have access to the Commercial Group Dental Plan underwritten and administered by Washington Dental Service (WDS). The plan utilizes Washington Dental Service's PPO network. When you receive your dental care from a PPO dentist, you will receive a higher level of benefits and will have fewer out-of-pocket costs.

	WITH A DELTA DENTAL PPO DENTIST	WITH A DELTA DENTAL PREMIER OR NON-MEMBER DENTIST
Class I – Diagnostic and Preventive Exams, Prophys, Fluoride, X-rays, Sealants	100%	80%
Class II – Restorative Fillings, Oral Surgery, Endodontics, Periodontics	80%	70%
Class III – Major Crowns, Dentures, Partial, Bridges	50%	40%
Deductible Per calendar year. Waived on Class I services.	\$50 per person \$150 per family	\$50 per person \$150 per family
Annual Maximum Per person per calendar year.	\$1,500	\$1,500
Orthodontia Coverage Payable at 50% to a lifetime maximum of \$1,000 for eligible dependent children.		

	RATES	FOR TEMPOROMANDIBULAR JOINT (TMJ) RIDER (OPTIONAL) PAY AN ADDITIONAL:
Employee only	\$43.21	\$.85
Employee and spouse	\$86.31	\$1.62
Employee and child(ren)	\$111.53	\$1.50
Employee and spouse and child(ren)	\$154.63	\$2.27

TMJ Benefits Rider

WDS will pay the following benefits for the treatment of TMJ disorders:

- \$1,000 per covered individual, after payment of deductibles, coinsurance, and copayments
- Applicable during any calendar year
- Individual lifetime benefit is \$5,000

This is a brief summary of benefits and is not intended to constitute a contract.

For complete plan information, please refer to your plan booklet.