Stifel – Enhanced Plan (MO7756)	Delta Dental PPO SM Network	Delta Dental Premier [®] Network	Out-of-Network
Preventive Services Bitewing x-rays Emergency palliative treatment Full mouth x-rays Oral Examinations Prophylaxis (cleanings) Sealants Topical fluoride treatments Periapical x-rays Problem focused exams Brush biopsy	90%	80%	80%
Basic Services Fillings Non-Surgical Periodontics Oral surgery, including simple and surgical extractions Periodontal maintenance Endodontics Prefabricated stainless steel crowns Localized delivery of antimicrobials Recement crowns, bridges, inlays and onlays	70%	70%	70%
 Major Services Prosthetics: bridges and dentures Crowns, inlays and onlays Surgical Periodontics Occlusal guard for bruxism General anesthesia in conjunction with covered surgical procedures Implants 	50%	50%	50%
 Orthodontia Orthodontia for all eligible participants (lifetime maximum) 	50% up to \$1,500 subject to deductible	50% up to \$1,000 subject to deductible	50% up to \$1,000 subject to deductible
Calendar Year Deductible (Applied to Basic, Major and Orthodontic Services)	\$50 individual 3X family	\$50 individual 3X family	\$50 individual 3X family
Annual Maximum (Applied to Preventive, Basic and Major Services) <i>Healthy Smiles, Healthy Lives</i> Benefit Option – Two additional clear diabetic, have a suppressed immune system, cardiovascular disease, or h			\$1,500 who are pregnant,

Dependent Age Limit: 26 (end of month)

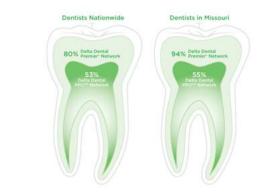
About Delta Dental networks

Delta Dental PPO Providers: agree to accept contractual reimbursement as payment in full and will not balance bill.

Delta Dental Premier Providers: agree to accept contractual reimbursement as payment in full and will not balance bill.

Out-of-Network Providers: are not contracted with Delta Dental and therefore may balance bill the difference between Delta Dental's out-of-network payment and billed charges.

Delta Dental PPO Providers typically offer the greatest discounts.



This is intended to be a summary only. If a discrepancy occurs the Summary Plan Document will govern. Please refer to your Summary Plan Description (SPD) for a more complete listing of services including plan limitations and exclusions.