

PACIFICARE DENTAL PPO PLAN II BENEFIT SUMMARY

Freedom to visit any dentist you wish or select a network dentist for additional savings

The PacifiCare Dental PPO Plan offers a balance of savings and choice. Participants can select any dentist they wish and receive a reimbursement for a percentage of the cost of covered procedures. Or they may visit a dentist from our large dental PPO network of credentialed dentists and enjoy greater cost savings.

Selecting a dentist from our dental PPO network is easy. You select your dentist at the time of service from our directory of network dentists who have agreed to

provide their services at a reduced fee. The dental PPO directory is available online at www.pacificare-dental.com. Just click the *Dentist Directory* link and choose *PPO Directory*. Or call Member Service at 800-22-TEETH (800-228-3384) for assistance.

If you decide to use an out-of-network dentist, which you may do on your PacifiCare Dental PPO Plan, your out-of-pocket costs will be higher.

See the reverse side for frequently asked questions about PacifiCare Dental PPO Plans.

Preventive Services

Includes checkups and cleanings, x-rays, fluoride treatments, and sealants. (Deductible is waived for these services both in- and out-of-network)

In-network=100%

Out-of-network=80% of scheduled fees

Basic Services

Includes fillings

In-network=80%

Out-of-network=50% of scheduled fees

Major Services

Includes crowns, dentures, root canals, and extractions

In-network=50%

Out-of-network=50% of scheduled fees

Deductible & Maximum

Calendar Year Maximum per person\$1,500

In-network Calendar Year Deductible
(Individual/Family)\$50/\$150

Out-of-network Calendar Year Deductible
(Individual/Family)\$100/\$300

Orthodontics

Your PacifiCare Dental PPO Plan includes orthodontic services. Please check with your group administrator to see what coverage your group has selected.

For a complete description of benefits, exclusions and limitations, refer to the PacifiCare Dental PPO Certificate of Coverage booklet.

The PacifiCare Dental PPO Plan is underwritten by PacifiCare Life & Health Insurance Company, Inc.

PacifiCare[®]
Dental & Vision Administrators

Visit our website at www.pacificare-dental.com

Member Service

Monday-Friday, 7 a.m.-6 p.m. Pacific Time

1-800-22-TEETH (1-800-228-3384)

PACIFICARE DENTAL PPO PLAN II FREQUENTLY ASKED QUESTIONS

Q: *Where do I find a listing of participating dentists in my area?*

A: Use your PacificCare Dental PPO directory or call Member Service at 800-228-3384 for assistance. The directory is also available on our website at www.pacificare-dental.com. Just click the Dentist Directory link and choose PPO Directory.

Q: *How can I know ahead of time what my out-of-pocket cost will be?*

A: Ask your dentist for a pre-determination of cost based on your plan's benefits. He/she can submit your proposed treatment plan to PacificCare Dental Administrators, and we'll send him/her an explanation of benefits. You will then be able to discuss your treatment and payment as a well-informed patient.

Q: *Will I have to pay more if I visit a non-participating dentist?*

A: Out-of-pocket cost for a non-network dentist will be higher. Be sure to discuss fees up front with your dentist when he/she gives you a treatment plan.

Q: *May I get a second opinion?*

A: You may. Reimbursement will be subject to your plan's benefits.

Q: *Do I need a referral to see a specialist?*

A: No. You may visit any participating or non-participating dentist based on your preferences or your dentist's recommendation.

Q: *How do I file my claim?*

A: You may submit a claim form directly to us or your dentist can submit one for you. A claim form is provided to you in your plan materials. If you need another claim form, you can either download one from our website at www.pacificare-dental.com or call Claims Research at 800-622-6389 and request one from any of the friendly representatives available to help you.

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