



SAN FRANCISCO CONTRIBUTORY DENTAL RATES AND BENEFITS: EXP. 4/30/10

Groups 2-50

Plan	In NETWORK Coinsurance	Out of Network Coinsurance	Waiting Period	Endo/Perio	Ortho	Deduct	Consumer MaxMultiplier	Ann. Max	Voluntary?	UCR
P5329	100/80/50	70/50/50	No	Basic	0%	50/150	Yes	\$ 1,000	No	MAC
P5330	100/80/50	70/50/50	No	Basic	0%	50/150	Yes	\$ 1,500	No	MAC
P5331	100/90/60	70/50/50	No	Basic	50%/\$1,000	50/150	Yes	\$ 1,500	No	MAC
P3434	100/80/50	80/60/50	No	Basic	0%	50/150	Yes	\$ 1,000	No	85th
P4883	100/80/50	100/80/50	No	Basic	0%	50/150	Yes	\$ 1,500	No	90th
P4216	100/90/60	100/80/50	No	Basic	0%	50/150	Yes	\$ 2,000	No	85th

State	GeoZip	Group Size	Plan ID	Plan Type	EE	EE+SP	EE+CH	Family
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P5329 100*/80/50 \$50 Deductible No Wait \$1000 Contributory

CA	941,944,949	2-4 Lives	P5329	DPPO	\$28.70	\$57.40	\$60.06	\$91.69
CA	941,944,949	5-9 Lives	P5329	DPPO	\$26.12	\$52.23	\$54.65	\$83.42
CA	941,944,949	10-20 Lives	P5329	DPPO	\$24.70	\$49.41	\$51.70	\$78.92
CA	941,944,949	21-24 Lives	P5329	DPPO	\$23.59	\$47.17	\$49.36	\$75.34
CA	941,944,949	25-50 Lives	P5329	DPPO	\$22.68	\$45.35	\$47.45	\$72.43

P5330 100*/80/50 \$50 Deductible No Wait \$1500 Contributory

CA	941,944,949	2-4 Lives	P5330	DPPO	\$32.16	\$64.32	\$67.30	\$102.73
CA	941,944,949	5-9 Lives	P5330	DPPO	\$29.26	\$58.52	\$61.23	\$93.47
CA	941,944,949	10-20 Lives	P5330	DPPO	\$27.68	\$55.36	\$57.92	\$88.42
CA	941,944,949	21-24 Lives	P5330	DPPO	\$26.43	\$52.85	\$55.30	\$84.42
CA	941,944,949	25-50 Lives	P5330	DPPO	\$25.41	\$50.81	\$53.16	\$81.16

P5331 100*/90/60 \$50 Deductible No Wait \$1500 Child Ortho Contributory

CA	941,944,949	10-20 Lives	P5331	DPPO	\$34.07	\$68.13	\$71.29	\$108.83
CA	941,944,949	21-24 Lives	P5331	DPPO	\$32.53	\$65.05	\$68.06	\$103.90
CA	941,944,949	25-50 Lives	P5331	DPPO	\$31.27	\$62.54	\$65.43	\$99.89

P3434 100*/80/50 \$50 Deductible No Wait \$1000 Contributory

CA	941,944,949	2-4 Lives	P3434	DPPO	\$46.48	\$92.96	\$97.26	\$148.48
CA	941,944,949	5-9 Lives	P3434	DPPO	\$42.29	\$84.58	\$88.50	\$135.10
CA	941,944,949	10-20 Lives	P3434	DPPO	\$40.00	\$80.01	\$83.71	\$127.79
CA	941,944,949	21-24 Lives	P3434	DPPO	\$38.19	\$76.39	\$79.93	\$122.01
CA	941,944,949	25-50 Lives	P3434	DPPO	\$36.72	\$73.44	\$76.84	\$117.30

P4883 100*/80/50 \$50 Deductible No Wait \$1500 Contributory

CA	941,944,949	2-4 Lives	P4883	DPPO	\$66.91	\$133.81	\$140.01	\$213.73
CA	941,944,949	5-9 Lives	P4883	DPPO	\$60.88	\$121.75	\$127.39	\$194.47
CA	941,944,949	10-20 Lives	P4883	DPPO	\$57.59	\$115.17	\$120.50	\$183.95
CA	941,944,949	21-24 Lives	P4883	DPPO	\$54.98	\$109.96	\$115.05	\$175.63

P4216 100*/90/60 \$50 Deductible No Wait \$2000 Contributory

CA	941,944,949	10-20 Lives	P4216	DPPO	\$62.90	\$125.79	\$131.62	\$200.92
CA	941,944,949	21-24 Lives	P4216	DPPO	\$60.05	\$120.10	\$125.66	\$191.83
CA	941,944,949	25-50 Lives	P4216	DPPO	\$57.73	\$115.46	\$120.81	\$184.42

For a more comprehensive list of options please contact your Sales Representative

* Denotes where Endo/Perio services are covered



SAN FRANCISCO VOLUNTARY DENTAL RATES AND BENEFITS: EXP. 4/30/10

Groups 2-50

Plan	In NETWORK Coinsurance	Out of Network Coinsurance	Waiting Period	Endo/Perio	Ortho	Deduct	Consumer MaxMultiplier	Ann. Max	Voluntary?	UCR
P3306	100/80/50	80/50/50	Yes	Major	0%	50/150	Yes	\$ 1,000	Yes	MAC
P3337	100/80/50	100/80/50	Yes	Major	0%	50/150	Yes	\$ 1,000	Yes	85th
P3350	100/80/50	80/60/50	No	Major	0%	50/150	Yes	\$ 1,500	Yes	85th
P3378	100/80/50	100/80/50	No	Basic	0%	50/150	Yes	\$ 1,000	Yes	85th
P3362	100/90/60	100/80/50	No	Major	0%	50/150	Yes	\$ 2,000	Yes	85th
P3389	100/80/50	100/80/50	No	Basic	0%	50/150	Yes	\$ 1,500	Yes	85th

State	GeoZip	Group Size	Plan ID	Plan Type	EE	EE+SP	EE+CH	Family
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P3306 100/80/*50 \$50 Deductible Wait \$1,000 Voluntary

CA	941,944,949	2-4 Lives	P3306	VPPO	\$27.62	\$55.24	\$57.80	\$88.23
CA	941,944,949	5-9 Lives	P3306	VPPO	\$25.13	\$50.26	\$52.59	\$80.28
CA	941,944,949	10-20 Lives	P3306	VPPO	\$23.77	\$47.55	\$49.75	\$75.94
CA	941,944,949	21-24 Lives	P3306	VPPO	\$22.70	\$45.40	\$47.50	\$72.51
CA	941,944,949	25-50 Lives	P3306	VPPO	\$21.82	\$43.64	\$45.66	\$69.71

P3337 100/80/*50 \$50 Deductible Wait \$1000 Voluntary

CA	941,944,949	2-4 Lives	P3337	VPPO	\$51.09	\$102.19	\$106.92	\$163.22
CA	941,944,949	5-9 Lives	P3337	VPPO	\$46.49	\$92.98	\$97.28	\$148.51
CA	941,944,949	10-20 Lives	P3337	VPPO	\$43.98	\$87.95	\$92.02	\$140.48
CA	941,944,949	21-24 Lives	P3337	VPPO	\$41.99	\$83.97	\$87.86	\$134.12
CA	941,944,949	25-50 Lives	P3337	VPPO	\$40.36	\$80.73	\$84.47	\$128.94

P3350 100/80/*50 \$50 Deductible No Wait \$1500 Voluntary

CA	941,944,949	10-20 Lives	P3350	VPPO	\$43.94	\$87.87	\$91.94	\$140.36
CA	941,944,949	21-24 Lives	P3350	VPPO	\$41.95	\$83.90	\$87.78	\$134.00
CA	941,944,949	25-50 Lives	P3350	VPPO	\$40.33	\$80.66	\$84.39	\$128.83

P3378 100/*80/50 \$50 Deductible No Wait \$1,000 Voluntary

CA	941,944,949	10-20 Lives	P3378	VPPO	\$52.71	\$105.42	\$110.30	\$168.38
CA	941,944,949	21-24 Lives	P3378	VPPO	\$50.33	\$100.65	\$105.31	\$160.76
CA	941,944,949	25-50 Lives	P3378	VPPO	\$48.38	\$96.76	\$101.24	\$154.55

P3362 100/90/*60 \$50 Deductible No Wait \$2,000 Voluntary

CA	941,944,949	10-20 Lives	P3362	VPPO	\$58.27	\$116.55	\$121.94	\$186.15
CA	941,944,949	21-24 Lives	P3362	VPPO	\$55.64	\$111.27	\$116.42	\$177.73
CA	941,944,949	25-50 Lives	P3362	VPPO	\$53.49	\$106.98	\$111.93	\$170.86

P3389 100/*80/50 \$50 Deductible No Wait \$1500 Voluntary

CA	941,944,949	10-20 Lives	P3389	VPPO	\$57.49	\$114.97	\$120.29	\$183.64
CA	941,944,949	21-24 Lives	P3389	VPPO	\$54.88	\$109.77	\$114.85	\$175.33
CA	941,944,949	25-50 Lives	P3389	VPPO	\$52.76	\$105.53	\$110.42	\$168.55

All plans include our Consumer MaxMultiplier annual maximum rollover feature, our Prenatal Dental Care Program and our Oral Cancer Screening Benefit; ask your Sales Representative for details.