

SEBB Uniform Dental Plan Group #09600

Delta Dental PPOSM Uniform Dental Plan - Benefit Summary

Amounts below show what the plan pays

Effective Date	January 1, 2027
Benefit Period	January 1, 2027 – December 31, 2027
Benefit Period Maximum (Per Person)	\$1,750
TMJ - (Non-Surgical)	70%
Annual Maximum (Per Person)	\$1,000
Lifetime Maximum (Per Person)	\$5,000
Orthodontia – Adults & Children	50%
Lifetime Maximum (Per Person)	\$1,750

Choice of Dentist ->>>

Amounts below show what the plan pays once you've met your deductible.

Dental Networks

Delta Dental
PPOSM Dentists in
Washington State

Non-PPO Dentists in
Washington State

Out of State

Benefit Period Deductible (Per Person/Per Family)

Deductible Does Not Apply to Class I, Orthodontia or Children Under Age 15	\$50/\$150	\$50/\$150	\$50/\$150
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Class I – Diagnostic & Preventive

Exams (two in a benefit period)	100%	80%	90%
Cleaning (two in a benefit period)			
Fluoride			
X-Rays (complete X-rays every 5 years)			
Sealants			

Class II – Restorative

Fillings	80%	70%	80%
Posterior Composite Fillings			
Endodontics (Root Canal)			
Periodontics (Gum Treatment)			
Oral Surgery			
General Anesthesia/IV Sedation			

Crowns

Crowns	70%	60%	70%
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Class III – Major

Dentures	50%	40%	50%
Partial Dentures			
Implants			
Bridges			



This is a brief summary of benefits and isn't a contract. The plan's benefits booklet provides more details of your Uniform Dental Plan. Please feel free to call 800-537-3406 or text 833-604-1246 our customer service department or visit our website at deltadentalwa.com/sebb if you have any questions.

Keep in mind, the plan pays a higher percentage when you see dentists in the Delta Dental PPO network.

Uniform Dental Plan

Group #09600

THIS IS THE DELTA DENTAL PPO PLAN

Best for those who want the freedom to choose their favorite dentist

- > You pick your dentist from large state and national provider networks
- > Get specialist care without a referral
- > No deductible for preventive care , orthodontia, and services for children under age 15
- > Posterior composite filling coverage
- > Enhanced crown coverage
- > Coverage for out-of-network care

Visit a Delta Dental PPOSM or Delta Dental PremierSM network dentist to receive services at discounted rates and avoid surprise costs.

When seeing a Delta Dental PPOSM network dentist, you may have lower out-of-pocket costs because the plan pays a higher percentage.

Check that your dentist is in-network or find a new PPO dentist:



1. Visit deltadentalwa.com/sebb
2. Click "Find a Dentist" and log in or register for your MySmile account
3. In your MySmile account scroll down on your dashboard to "Find a Dentist" and follow the steps to search for an in-network dentist.
4. PLEASE NOTE: Make sure the select "PPO" from the dropdown under "Choose your network."



HELPFUL ONLINE TOOLS

Activate your MySmile[®] account online at deltadentalwa.com/sebb and click "MySmile."

- > Print your ID card.
- > View your coverage.
- > Get instant out-of-pocket cost estimates with MySmile Cost Estimator.
- > Review your Explanation of Benefits (EOB).