

**COVERED
CALIFORNIA**

Family Dental PLANS AND RATES FOR 2017

October 2016

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About Covered California™

Covered California is the state's marketplace for the federal Patient Protection and Affordable Care Act. Covered California, in partnership with the California Department of Health Care Services, was charged with creating a new health insurance marketplace in which individuals and small businesses can get access to affordable health insurance plans. Covered California helps individuals determine whether they are eligible for premium assistance that is available on a sliding-scale basis to reduce insurance costs or whether they are eligible for low-cost or no-cost Medi-Cal. Consumers can then compare health insurance plans and choose the plan that works best for their health needs and budget. Small businesses can purchase competitively priced health insurance plans and offer their employees the ability to choose from an array of plans and may qualify for federal tax credits.

In addition to helping consumers who are eligible for federal premium assistance, Covered California seeks to improve the insurance options for all Californians in the individual market. All of the health insurance plans with embedded children's dental are available both through Covered California and in the individual market — at the same price. In addition, every health insurance company that sells an insurance product to individuals must sell one that matches Covered California's standard benefit designs. This means that all consumers can now make true apple-to-apples comparisons of their health insurance options.

Covered California is an independent part of the state government whose job is to make the new market work for California's consumers. It is overseen by a five-member board appointed by the governor and the Legislature. For more information on Covered California, please visit www.CoveredCA.com.

This booklet does not include dental rates for Covered California for Small Business.

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About Covered California's Family Dental Plans

California families now have expanded opportunities for improved dental health through Covered California's offerings of family dental plans.

The plans offer comprehensive coverage for both children and adults. Purchase of the plans is optional and comes at an additional cost. Adults can choose to enroll in family dental plans without enrolling the entire family. In the individual exchange, the participating dental carriers are:

- **Access Dental Plan**
- **Anthem Blue Cross**
- **California Dental Network**
- **Delta Dental of California**
- **Dental Health Services**
- **Liberty Dental**
- **Premier Access**

There are two different product types available, depending on where a family lives. The dental preferred provider organization (DPPO) product offers a wide variety of provider choice within a network of participating dentists, as well as coverage for some out-of-network services. The dental health maintenance organization (DHMO) limits coverage to services provided by a dentist within a network and generally requires a referral to be seen by a specialist.

Covered California family dental plans feature standard copayments, deductibles and coinsurance requirements. The children's benefit designs have an actuarial value of 85 percent. An actuarial value is the overall average percentage of costs for benefits that a dental plan will cover.

These premiums are for "stand-alone" plans, or dental benefit products that can be purchased in addition to a health plan.

Dental plans must follow Covered California standard benefit designs. Standardizing benefits ensures that the selected plans define what the consumers get and allows consumers to choose a plan that's right for them based on quality, network and value. Key benefit features include comprehensive treatment services like root canals and crowns, along with diagnostic and preventive services that are available at no charge without being subject to deductible.

Family Dental Plan Standard Benefit Designs – DHMO

ENROLLEE PAYS – DHMO		
Coverage category	Child	Adult
Diagnostic and preventive (includes X-rays, exams, cleanings and sealants)	\$ 0	\$ 0
Amalgam filling – one surface	\$ 25	\$ 25
Root canal – molar	\$ 300	\$ 300
Gingivectomy per tooth	\$ 50	\$ 50
Extraction – single tooth, exposed root or erupted	\$ 65	\$ 65
Extraction – complete bony	\$ 160	\$ 160
Crown – porcelain with metal	\$ 300	\$ 300
Medically necessary orthodontia	\$ 350	not covered
Enrollee costs		
Deductible (<i>waived for diagnostic and preventive</i>)	\$ 0	\$ 0
Annual benefit limit	none	none
Individual out-of-pocket maximum	\$ 350	N/A
Family out-of-pocket maximum (<i>two or more children</i>)	\$ 700	N/A
Office copay	\$ 0	\$ 0
Waiting period	none	none

The listed services and the associated cost-sharing amounts represent a summary of services the plan provides. Please refer to the plan's Policy or Evidence of Coverage for a complete list of covered services provided and any exclusions and limitations on those services.

Family Dental Plan Standard Benefit Designs – DPPO

ENROLLEE PAYS – DPPO				
Coverage category	Child IN network	Child OUT of network	Adult IN network	Adult OUT of network
Diagnostic and preventive (includes X-rays, exams, cleanings and sealants)	0%	10%	0%	10%
Amalgam filling – one surface	20%	30%	20%	30%
Root canal – molar	50%	50%	50%	50%
Gingivectomy per quad	50%	50%	50%	50%
Extraction – single tooth, exposed root or erupted	50%	50%	50%	50%
Extraction – complete bony	50%	50%	50%	50%
Crown – porcelain with metal	50%	50%	50%	50%
Medically necessary orthodontia	50%	50%	not covered	not covered
Enrollee costs				
Deductible (<i>waived for diagnostic and preventive</i>)	\$ 65	\$ 65	\$ 50	\$ 50
Annual benefit limit	none		\$ 1,500	
Individual out-of-pocket maximum	\$ 350	N/A	N/A	
Family out-of-pocket maximum (<i>two or more children</i>)	\$ 700	N/A	N/A	
Office copay	\$ 0	\$ 0	\$ 0	\$ 0
Waiting period	none	none	6 months* for major services	6 months* for major services

The listed services and the associated cost-sharing amounts represent a summary of services the plan provides. Please refer to the plan's Policy or Evidence of Coverage for a complete list of covered services provided and any exclusions and limitations on those services.

* Waived with proof of prior coverage.

Notes on Family Dental Plan Standard Benefit Designs

Children's dental benefit notes (only applicable to the pediatric portion of the family dental plan)

1. In a coinsurance plan, each child has an individual deductible unless the family deductible has been met. Once a child's individual deductible or the family deductible is reached, cost-sharing applies until the child's out-of-pocket maximum is reached.
2. Cost-sharing payments made by each individual child for in-network services accrue to the child's out-of-pocket maximum. Once the child's individual out-of-pocket maximum has been reached, the plan pays all costs for covered services for that child.
3. In a plan with two or more children, cost-sharing payments made by each individual child for in-network services contribute to the family deductible, if applicable, as well as the family out-of-pocket maximum.
4. Only enrollees in a Covered California Platinum, Gold, Silver or Bronze health insurance plan are eligible to purchase family dental plans.
5. The member cost share for Medically Necessary Orthodontia services applies to the course of treatment, not individual benefit years within a multi-year course of treatment. This member cost share applies to the course of treatment as long as the member remains enrolled in the plan.

Adult dental benefit notes (only applicable to the family dental plan)

1. Each adult is responsible for an individual deductible.
2. Families that wish to purchase a family dental plan must include at least one adult who has purchased a Platinum, Gold, Silver or Bronze insurance plan through Covered California.
3. If a child is enrolled in the family dental plan, all children in the family under age 19 must be enrolled in the same family dental plan.
4. Tooth whitening, adult orthodontia and implants are not covered services.

Dental Terms

Amalgam filling – one surface

A mixture of materials used to repair cavities on a single surface of the tooth.

Annual benefit limit

The maximum amount a plan will pay in a benefit year toward an adult member's dental care costs.

Extraction

The removal of a tooth.

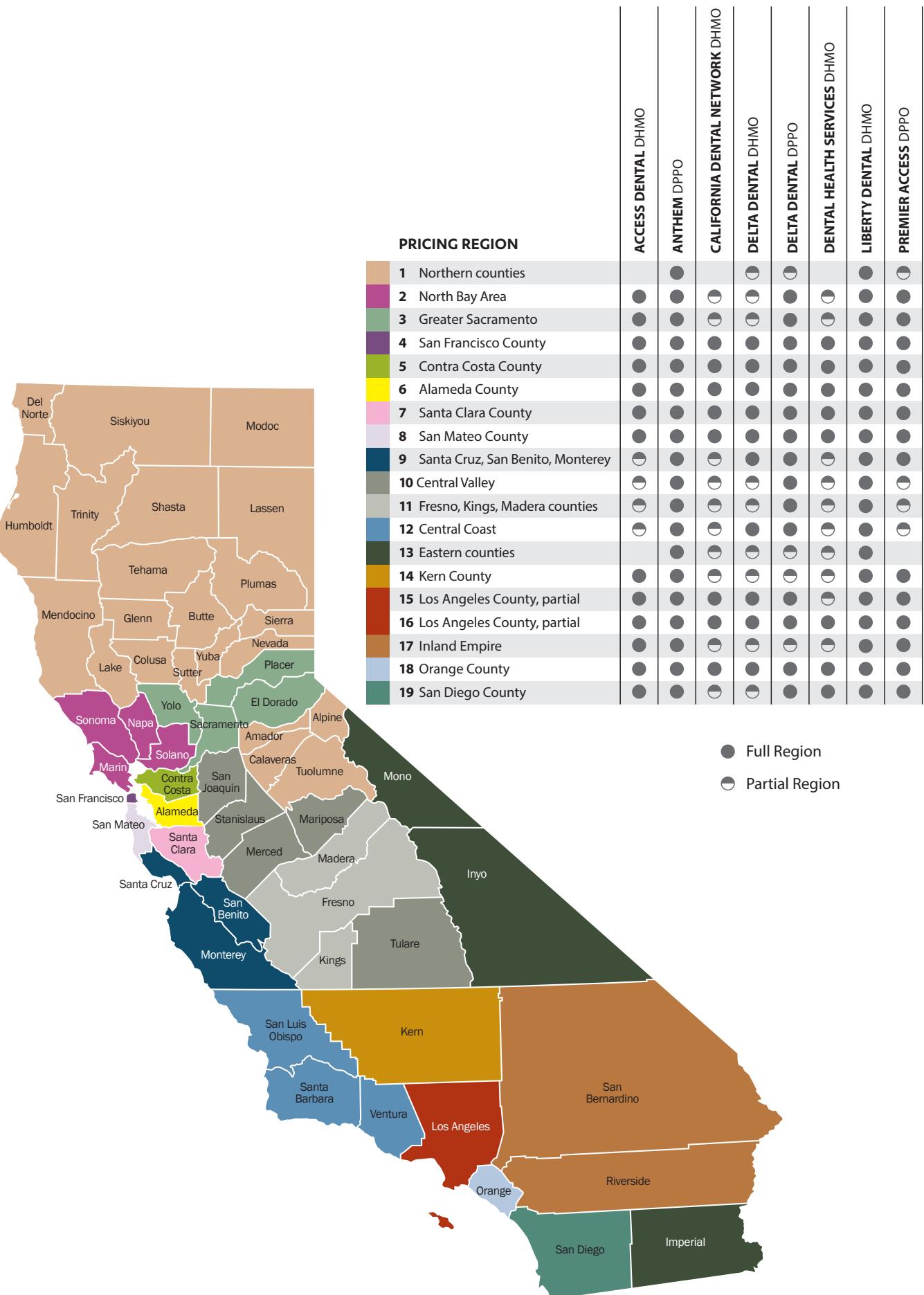
Root canal

A dental procedure to fix a damaged nerve of a tooth by removing the nerve and filling it with suitable material.

Waiting period

The length of time a newly enrolled adult member must wait before the dental plan pays toward major dental services.

Pricing Regions and Plan Availability for Family Dental



Dental Companies by County

The following pages list all the ZIP codes in each county of the state. To see which dental plans are available in your area, go to the page listed below for your county to find your ZIP code. This also shows your pricing region which will provide the plan premium rates on pages 33-42.

county	page number(s)	county	page number(s)
Alameda.....	8	Orange	19-20
Alpine.....	8	Placer.....	20
Amador	8	Plumas	20
Butte	8	Riverside	20-21
Calaveras.....	8-9	Sacramento	21-22
Colusa.....	9	San Benito.....	22
Contra Costa	9	San Bernardino	22-24
Del Norte.....	9	San Diego	24-25
El Dorado	9-10	San Francisco	25-26
Fresno	10	San Joaquin.....	26
Glenn	10-11	San Luis Obispo.....	26
Humboldt.....	11	San Mateo	26-27
Imperial.....	11	Santa Barbara	27
Inyo	11	Santa Clara.....	27-28
Kern	11-12	Santa Cruz.....	28
Kings	12	Shasta.....	28-29
Lake.....	12	Sierra	29
Lassen	12	Siskiyou	29
Los Angeles.....	12-17	Solano	29
Madera.....	17	Sonoma	29
Marin	17	Stanislaus	29-30
Mariposa	17	Sutter.....	30
Mendocino.....	17-18	Tehama.....	30
Merced.....	18	Trinity.....	30
Modoc	18	Tulare	30-31
Mono	18	Tuolumne	31
Monterey.....	18	Ventura	31
Napa	18	Yolo	31
Nevada.....	18-19	Yuba	31-32

ZIP Code	County	Region	Access Dental — DHMO	Anthem — DPPO	California Dental Network — DHMO	Delta Dental — DHMO	Delta Dental — DPPO	Dental Health Services — DHMO	Liberty Dental — DHMO	Premier Access — DPPO
95960	Yuba	1	•			•	•	•	•	
95961	Yuba	1	•	•		•	•	•	•	
95962	Yuba	1	•			•	•	•	•	
95966	Yuba	1	•			•	•	•	•	
95972	Yuba	1	•			•	•	•	•	
95977	Yuba	1	•			•	•	•	•	
95981	Yuba	1	•			•	•	•	•	

Pricing Region 1

Alpine, Del Norte, Siskiyou, Modoc, Lassen, Shasta, Trinity, Humboldt, Tehama, Plumas, Nevada, Sierra, Mendocino, Lake, Butte, Glenn, Sutter, Yuba, Colusa, Amador, Calaveras, Tuolumne



FAMILY DENTAL RATES		
PLAN	ADULT	CHILD
Anthem DPPO	\$47.25	\$27.05
Delta Dental* DHMO	\$21.99	\$19.99
Delta Dental* DPPO	\$50.99	\$31.99
Liberty Dental DHMO	\$45.58	\$37.35
Premier Access* DPPO	\$52.58	\$52.32

Pricing Region 2

Napa, Sonoma, Solano, Marin



FAMILY DENTAL RATES		
PLAN	ADULT	CHILD
Access Dental DHMO	\$13.00	\$17.00
Anthem DPPO	\$53.45	\$30.70
California Dental Network* DHMO	\$8.23	\$11.41
Delta Dental* DHMO	\$14.99	\$15.49
Delta Dental DHMO	\$56.99	\$35.99
Dental Health Services* DHMO	\$11.50	\$13.10
Liberty Dental DHMO	\$19.61	\$20.15
Premier Access DPPO	\$52.58	\$52.32

* Partial Region

Pricing Region 3

Sacramento, Placer, El Dorado, Yolo



FAMILY DENTAL RATES		
PLAN	ADULT	CHILD
Access Dental DHMO	\$12.00	\$16.00
Anthem DPPO	\$53.45	\$30.70
California Dental Network* DHMO	\$8.23	\$11.41
Delta Dental* DHMO	\$14.99	\$15.49
Delta Dental DPPO	\$51.99	\$32.99
Dental Health Services* DHMO	\$11.50	\$13.10
Liberty Dental DHMO	\$8.31	\$14.30
Premier Access DPPO	\$52.58	\$52.32

Pricing Region 4

San Francisco



FAMILY DENTAL RATES		
PLAN	ADULT	CHILD
Access Dental DHMO	\$13.00	\$17.00
Anthem DPPO	\$52.40	\$30.10
California Dental Network DHMO	\$8.23	\$11.41
Delta Dental DHMO	\$13.99	\$14.49
Delta Dental DPPO	\$59.99	\$37.99
Dental Health Services DHMO	\$11.50	\$13.10
Liberty Dental DHMO	\$8.31	\$14.30
Premier Access DPPO	\$61.46	\$60.57

* Partial Region

Pricing Region 5

Contra Costa



FAMILY DENTAL RATES		
PLAN	ADULT	CHILD
Access Dental DHMO	\$13.00	\$17.00
Anthem DPPO	\$52.40	\$30.10
California Dental Network DHMO	\$8.23	\$11.41
Delta Dental* DHMO	\$13.99	\$14.49
Delta Dental DPPO	\$56.99	\$36.99
Dental Health Services DHMO	\$12.00	\$13.80
Liberty Dental DHMO	\$19.61	\$20.15
Premier Access DPPO	\$61.46	\$60.57

Pricing Region 6

Alameda



FAMILY DENTAL RATES		
PLAN	ADULT	CHILD
Access Dental DHMO	\$12.00	\$16.00
Anthem DPPO	\$52.40	\$30.10
California Dental Network DHMO	\$8.23	\$11.41
Delta Dental DHMO	\$13.99	\$14.49
Delta Dental DPPO	\$56.99	\$35.99
Dental Health Services DHMO	\$11.50	\$13.10
Liberty Dental DHMO	\$8.31	\$14.30
Premier Access DPPO	\$61.46	\$60.57

* Partial Region

Pricing Region 7

Santa Clara



FAMILY DENTAL RATES		
PLAN	ADULT	CHILD
Access Dental DHMO	\$12.00	\$16.00
Anthem DPPO	\$52.40	\$30.10
California Dental Network DHMO	\$8.23	\$11.41
Delta Dental* DHMO	\$13.99	\$14.49
Delta Dental DPPO	\$57.99	\$36.99
Dental Health Services DHMO	\$11.50	\$13.10
Liberty Dental DHMO	\$8.31	\$14.30
Premier Access DPPO	\$61.46	\$60.57

Pricing Region 8

San Mateo



FAMILY DENTAL RATES		
PLAN	ADULT	CHILD
Access Dental DHMO	\$13.00	\$17.00
Anthem DPPO	\$52.40	\$30.10
California Dental Network DHMO	\$8.23	\$11.41
Delta Dental DHMO	\$13.99	\$14.49
Delta Dental DPPO	\$56.99	\$35.99
Dental Health Services DHMO	\$11.50	\$13.10
Liberty Dental DHMO	\$19.61	\$20.15
Premier Access DPPO	\$61.46	\$60.57

* Partial Region

Pricing Region 9

Santa Cruz, Monterey, San Benito



FAMILY DENTAL RATES		
PLAN	ADULT	CHILD
Access Dental* DHMO	\$20.00	\$24.00
Anthem DPPO	\$53.45	\$30.70
California Dental Network* DHMO	\$8.23	\$11.41
Delta Dental DHMO	\$14.99	\$15.49
Delta Dental DPPO	\$55.99	\$35.99
Dental Health Services* DHMO	\$11.75	\$13.55
Liberty Dental DHMO	\$19.61	\$20.15
Premier Access DPPO	\$61.46	\$60.57

Pricing Region 10

San Joaquin, Stanislaus, Merced, Mariposa, Tulare



FAMILY DENTAL RATES		
PLAN	ADULT	CHILD
Access Dental* DHMO	\$13.00	\$17.00
Anthem DPPO	\$50.10	\$28.55
California Dental Network* DHMO	\$8.23	\$11.41
Delta Dental* DHMO	\$14.99	\$15.49
Delta Dental DPPO	\$50.99	\$31.99
Dental Health Services* DHMO	\$11.50	\$13.10
Liberty Dental DHMO	\$22.87	\$22.56
Premier Access* DPPO	\$52.58	\$52.32

* Partial Region

Pricing Region 11

Fresno, Kings, Madera



FAMILY DENTAL RATES		
PLAN	ADULT	CHILD
Access Dental* DHMO	\$13.00	\$17.00
Anthem DPPO	\$48.80	\$27.55
California Dental Network* DHMO	\$8.23	\$11.41
Delta Dental* DHMO	\$14.99	\$15.49
Delta Dental DPPO	\$48.99	\$30.99
Dental Health Services* DHMO	\$11.60	\$13.50
Liberty Dental DHMO	\$19.61	\$20.15
Premier Access* DPPO	\$52.58	\$52.32

Pricing Region 12

San Luis Obispo, Ventura,
Santa Barbara



FAMILY DENTAL RATES		
PLAN	ADULT	CHILD
Access Dental* DHMO	\$11.00	\$15.00
Anthem DPPO	\$51.90	\$29.85
California Dental Network* DHMO	\$8.23	\$11.41
Delta Dental DHMO	\$14.99	\$15.49
Delta Dental DPPO	\$53.99	\$33.99
Dental Health Services* DHMO	\$11.50	\$13.10
Liberty Dental DHMO	\$23.48	\$22.50
Premier Access* DPPO	\$52.58	\$52.32

* Partial Region

Pricing Region 13

Mono, Inyo, Imperial



FAMILY DENTAL RATES		
PLAN	ADULT	CHILD
Anthem DPPO	\$50.10	\$28.55
California Dental Network* DHMO	\$8.23	\$11.41
Delta Dental* DHMO	\$14.99	\$15.49
Delta Dental* DPPO	\$49.99	\$31.99
Dental Health Services* DHMO	\$13.75	\$15.00
Liberty Dental DHMO	\$43.87	\$37.15

Pricing Region 14

Kern



FAMILY DENTAL RATES		
PLAN	ADULT	CHILD
Access Dental DHMO	\$11.00	\$15.00
Anthem DPPO	\$47.25	\$27.05
California Dental Network* DHMO	\$8.23	\$11.41
Delta Dental* DHMO	\$13.99	\$14.49
Delta Dental* DPPO	\$49.99	\$31.99
Dental Health Services* DHMO	\$10.50	\$12.60
Liberty Dental DHMO	\$7.47	\$12.28
Premier Access DPPO	\$52.58	\$52.32

* Partial Region

Pricing Region 15

Los Angeles



FAMILY DENTAL RATES		
PLAN	ADULT	CHILD
Access Dental DHMO	\$11.00	\$15.00
Anthem DPPO	\$53.45	\$30.70
California Dental Network DHMO	\$8.23	\$11.41
Delta Dental DHMO	\$13.99	\$14.49
Delta Dental DPPO	\$51.99	\$32.99
Dental Health Services* DHMO	\$10.50	\$12.60
Liberty Dental DHMO	\$7.47	\$12.28
Premier Access DPPO	\$52.58	\$52.32

Pricing Region 16

Los Angeles



FAMILY DENTAL RATES		
PLAN	ADULT	CHILD
Access Dental DHMO	\$11.00	\$15.00
Anthem DPPO	\$51.90	\$29.85
California Dental Network DHMO	\$8.23	\$11.41
Delta Dental DHMO	\$13.99	\$14.49
Delta Dental DPPO	\$53.99	\$34.99
Dental Health Services DHMO	\$10.50	\$12.60
Liberty Dental DHMO	\$7.47	\$12.28
Premier Access DPPO	\$52.58	\$52.32

* Partial Region

Pricing Region 17

San Bernardino, Riverside



FAMILY DENTAL RATES		
PLAN	ADULT	CHILD
Access Dental DHMO	\$11.00	\$15.00
Anthem DPPO	\$50.10	\$28.55
California Dental Network* DHMO	\$8.23	\$11.41
Delta Dental* DHMO	\$13.99	\$14.49
Delta Dental* DPPO	\$50.99	\$31.99
Dental Health Services* DHMO	\$10.50	\$12.60
Liberty Dental DHMO	\$7.47	\$12.28
Premier Access DPPO	\$52.58	\$52.32

Pricing Region 18

Orange



FAMILY DENTAL RATES		
PLAN	ADULT	CHILD
Access Dental DHMO	\$11.00	\$15.00
Anthem DPPO	\$53.45	\$30.70
California Dental Network DHMO	\$8.23	\$11.41
Delta Dental DHMO	\$13.99	\$14.49
Delta Dental DPPO	\$54.99	\$34.99
Dental Health Services DHMO	\$10.50	\$12.60
Liberty Dental DHMO	\$7.47	\$12.28
Premier Access DPPO	\$52.58	\$52.32

* Partial Region

Pricing Region 19

San Diego



FAMILY DENTAL RATES		
PLAN	ADULT	CHILD
Access Dental DHMO	\$11.00	\$15.00
Anthem DPPO	\$53.45	\$30.70
California Dental Network* DHMO	\$8.23	\$11.41
Delta Dental* DHMO	\$13.99	\$14.49
Delta Dental DPPO	\$51.99	\$32.99
Dental Health Services DHMO	\$10.50	\$12.60
Liberty Dental DHMO	\$7.47	\$12.28
Premier Access DPPO	\$52.58	\$52.32

* Partial Region

Participating Dental Companies



Access Dental Plan | www.premierlife.com
(844) 561-5600

In 1989, the initial company that was to become Access Dental Plan was founded by a dentist for the purpose of delivering high quality dental care and administering effective dental benefit plans at a reasonable cost. In 1993, Access Dental Plan was founded to offer managed care dental coverage. The company expanded over the years, adding new products and services that were attractive to organizations and individuals to help meet the needs of their clients. The company continued to grow because Access Dental Plan understands what it takes to provide direct oral health care as well as administer benefit plans. It was true then and it remains true today. Today, Access Dental Plan and Premier Access Insurance Company serve over 1.3 million members.

Access Dental Plan takes pride in the stable, ethnically and geographically diverse provider panel it has maintained over the course of its history, and it continuously works to increase its networks where membership warrants growth. Access Dental Plan is happy to work with members to develop strategic recruitment plans targeting the dentists in the areas where increased network coverage is needed.

To access benefits members must elect a General Dentist from the Access Dental DHMO network. This is made easy several ways; by electing at enrollment through the website, contacting Access Dental's Customer Response Unit (CRU) from 6 a.m.-6 p.m. Monday – Friday at (844) 561-5600, or one will provided. Each family member may elect a different provider; changes can be made once a month, if desired, for first of month following effective date.

Members are encouraged to visit Access Dental's website at premierlife.com to find a provider, register to access plan information, take a dental risk assessment, review current health education materials or view cost estimators.

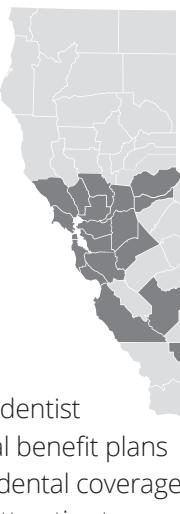
Welcome to Access Dental Plan!

Network

General dentists: 4,299

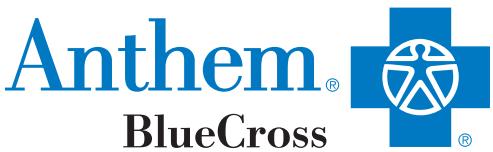
Pediatric dentists: 397

Specialists: 1,310



Available in these counties:

Participating Dental Companies



Blue Cross of California | www.anthem.com/ca
(877) 702-3074



Anthem Blue Cross is one of the largest managed health care companies in California. It is an independent licensee of the Blue Cross Blue Shield Association based in Thousand Oaks, California. Anthem and its affiliates serve nearly 945,000 Californians in dental programs statewide. Anthem's commitment to providing exceptional customer service to our members is unwavering. With more than 45 years of dental benefits administration experience and 800 dental-focused Anthem team members, consumers can be confident that Anthem can deliver Best in Class dental programs. Anthem holds an A.M. Best Company Rating of "A" (Excellent), proof of its strength and stability.

Anthem's got its members covered

With a long history of providing health and dental plans to Californians, Anthem's strength and stability in the marketplace offer members a wide network of nearly 13,000 dentists practicing at more than 32,000 locations. Anthem also offers access to credentialed dentists at more than 70 locations in Mexico for enrollees who travel there.

Innovative programs

Anthem is working with dentists to increase access to appointments and to provide coordinated treatment plans to patients. Anthem's work to improve member experience includes making available tools like a [Dental Cost Estimator](#) and [Dental Health Assessment](#). Anthem also provides member educational materials through their [Dental \(Oral\) Health Library](#).

Anthem has created Anthem Whole Health Connection, a clinical program to help transform the face of health care by connecting dental, vision, pharmacy and medical benefits so members get complete care with ease. Studies have shown that dental health is critical to overall health and wellness. Since 90 percent of the body's diseases first show signs and symptoms in the mouth, dentists are often the first to discover serious medical conditions including diabetes, heart disease, and even cancer. Anthem Whole Health Connection helps members get the right care, at the right time by working with members through care coordination programs and data analytics. With 120 different medical conditions detectable during a dental exam, routine dental checkups are more important than ever!

Online tools

Anthem's newly redesigned, easy to use Anthem Dental Member Services portal enables members to manage their care. Features include the ability to request their member ID card, find a dentist, and check the status of a claim. The user-friendly web-based tool includes access to the [Dental Cost Estimator](#) providing estimates for common dental procedures and treatments, as well as the [Dental Health Assessment](#) giving members even more opportunities to understand their dental care needs and costs prior to receiving care.

Network

General Dentists: 20,972

Pediatric Dentists: 1,316

Specialists: 8,997

Participating Dental Companies

California Dental Network

A DentaQuest company

California Dental Network | www.caldental.net
(855) 425-4164

As a DentaQuest company, California Dental Network shares in the mission to improve the oral health of all. California Dental Network, based in Southern California, has been serving individuals, families, employers, unions, and municipalities throughout California since 1998.



Improving members' dental and oral health

Reducing individuals' dental care expenses requires a good dental benefits experience so members can achieve improved dental health. California Dental Network helps members achieve these goals by providing a high quality network of dentists from which to receive dental care, and excellent customer service support to help members get the care and benefits they deserve.

Quality, accessible dentists

A good dental benefits experience begins with the dental office. Each California Dental Network provider is screened through the industry's highest credentialing process (NCQA) to ensure that members receive good quality care.

- CDN members rate their dentists' quality 3.5 (on a scale of 4).*
- 90 percent of CDN members would recommend their dental office.*

Customer service that supports members' needs

California Dental Network is proud that 95 percent of members would recommend their plan to a friend or family member.* California Dental Network understands that members and their families are counting on California Dental Network to help them deal with questions about benefits, providers, or just plain "What does this mean?" California Dental Network's dedicated Covered California phone line will help members with all of these issues in their language of comfort. And California Dental Network's online services provide a 24/7 resource to find answers to frequently asked questions and send request for help.

Network

General Dentists: 6,704

Pediatric Dentists: 349

Specialists: 3,995

*CDN Member Satisfaction Surveys 2011-2016

Participating Dental Companies



Delta Dental of California | deltadentalins.com DHMO: (800) 471-7583 | DPPO: (800) 471-0287

Delta Dental of California is a not-for-profit dental benefits administrator headquartered in San Francisco. The largest dental plan in the state, it covers 24 million people. Delta Dental of California is committed to advancing dental health and access through exceptional dental benefits service, technology and professional support. It prides itself on excellent customer service and on listening and responding to its members' needs.

Dentist networks

Delta Dental of California has some of the largest dentist networks in the state, with 15,981 PPO dentists and 5,916 DHMO facilities. Members also have access to nationwide Delta Dental networks.

A healthy mouth starts here

Skipping preventive care can lead to serious dental problems. Expensive treatments can quickly add up to more than a full year's premium and result in lost time at work or school. Delta Dental of California offers two different plans so that members choose the one that best fits their or their family's needs. A Delta Dental PPOS plan lets members visit any licensed dentist but gives members access to one of California's largest dentist networks. PPO dentists agree to never balance bill more than their contracted fees, which keeps costs low. The DeltaCare® USA plan (DHMO) requires members to choose one dentist or dental facility to coordinate all oral health needs. If a member needs to see a specialist, their primary care network dentist will refer them, with some services requiring preauthorization. Best of all, there are no claim forms to fill out.

Quick and easy online tools 24/7

Delta Dental makes it easy to find information from either a smartphone or computer. Once a member has registered for an online account, they can look up eligibility, view or print their ID card, manage their profile preferences (such as opting to receive paperless claims), find specifics about their coverage and benefits, view claims and more.

Delta Dental's Find a Dentist tool enables members to search for a network dentist. Members can search for dentists near a specific address, by name or by specialty. Members can also filter search parameters to include languages, gender, office accessibility and extended office hours. Log in first to automatically bring up a list of network dentists.

Network

PPO: 12,780 general dentists, 446 pediatric dentists and 2,755 specialists
DHMO: 2,561 general dentists, 331 pediatric dentists and 2,853 specialists



Participating Dental Companies



Dental Health Services

Dental Health Services

www.dentalhealthservices.com/CA/
(855) 495-0905

As the only employee-owned dental plan in the country, Dental Health Services specializes in providing excellent service and outstanding dental benefits to members along the West Coast. Founded by a California dentist in 1974, Dental Health Services has been serving the dental needs of individuals, families, groups, and unions for more than 40 years. Dental Health Services continues to foster its mission of bringing quality, affordable dental care to those who need it. Their employee-owners are the neighbors and friends who work, live and play right here in California.

Plan members have access to an exclusive network of quality assured participating dentists including 2,632 general dentists, 406 pediatric dentists, and 1,550 specialists. The Member Services customer service team is ready to assist with dentist selection and getting members started on the path to excellent oral health.

Dental Health Services is staffed with real people who advocate for members' optimal oral health and overall well-being. Along with unmatched service from these dedicated employee-owners, plan members enjoy low premiums and copayments with no annual maximums.

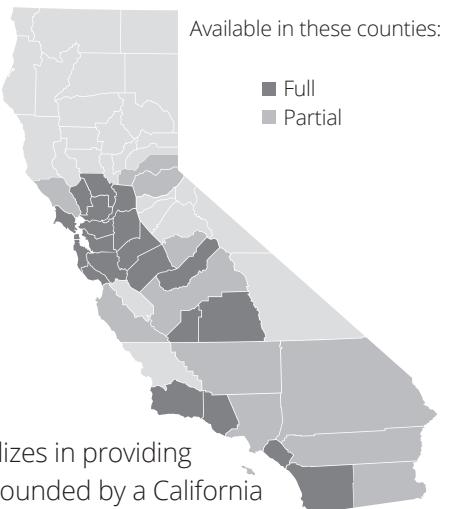
For more information on a qualified dental plan or to find a dentist, visit Dental Health Services online at www.dentalhealthservices.com/CA/.

Network

General Dentists: 2,632

Pediatric Dentists: 406

Specialists: 1,550



Participating Dental Companies



LIBERTY Dental Plan

www.libertydentalplan.com/coveredca
(888) 844-3344

LIBERTY Dental Plan of California, Inc. (LIBERTY) has been administering dental benefits since 2001. Founded and headquartered in California, LIBERTY takes pride in offering a network of quality dental professionals throughout the Golden State. All contracted dentists undergo screening (credentialing), background checks, and office evaluations. This relationship enables LIBERTY members to receive the care they deserve when enrolling in LIBERTY's plans.

LIBERTY's mission is to be the industry leader in providing quality, innovative and affordable dental benefits with the utmost attention to member satisfaction. Their commitment is to deliver cost-effective services while constantly striving to serve the needs of our members and contracted dentists. They currently serve over 3 million members nationwide and continue to experience growth in membership and reputation.

LIBERTY offers their members:

- Benefits at copays – no claims required.
- Concierge-style "live" customer service — they answer calls in real time.
- Online access to claims, eligibility and benefits, inquiries and more.
- Mobile phone app access to electronic ID cards, dentist search, and benefit and copay information.
- Access to a network of quality dental professionals throughout the Golden State.
- Service from a local company that specializes in delivering a quality dental benefit experience.



Available in all counties

Network

General dentists: 2,697

Pediatric dentists: 251

Specialists: 746

Participating Dental Companies



**PREMIER
ACCESS**
Dental and Vision

Premier Access Insurance Company

www.premierlife.com

(844) 561-5600

In 1989, the initial company that was to become Premier Access was founded by a dentist for the purpose of delivering high quality dental care and administering effective dental benefit plans at a reasonable cost. In 1997, Premier Access Insurance Company was founded to offer PPO dental coverage. The company expanded over the years, adding new products and services that were attractive to organizations and individuals to help meet the needs of their clients. The company continued to grow because Premier Access understands what it takes to provide direct oral health care as well as administer benefit plans. It was true then and it remains true today. Today Premier Access serves nearly 1,000,000 members.

Premier Access takes pride in the stable, ethnically and geographically diverse provider panel it has maintained over the course of its history, and it continuously works to increase its networks where membership warrants growth. Premier Access is happy to work with members to develop strategic recruitment plans targeting the dentists in the areas where increased network coverage is needed. By utilizing network providers members can see a savings of up to 30 percent.

The Premier Access Customer Response Unit (CRU) is available from 6 a.m. – 6 p.m. Monday–Friday at (844) 561-5600. CRU can assist with finding a provider, understanding benefits & coverage, ordering an ID Card, etc.

Members are encouraged to visit the Premier Access website at premierlife.com to find a provider, register to access plan information, take a dental risk assessment, review current health education materials or view cost estimators.

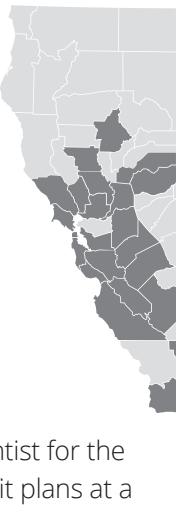
Welcome to Premier Access Insurance Company!

Network

General dentists: 12,286

Pediatric dentists: 562

Specialists: 2,042



Available in these counties:

Glossary

Actuarial value

A health insurance plan's actuarial value is the percentage of total average costs for benefits that a health insurance plan covers. These expenses are usually incurred at the point of receiving health care services — when you visit the doctor or the emergency room, for example. Dental plans come in two actuarial value options: 85 percent, which features higher premiums but lower average out-of-pocket costs; and a 70 percent value plan with lower premiums and higher average out-of-pocket costs. An actuarial value is the percentage of total average costs for benefits that a dental plan will cover.

Amalgam filling – one surface

A mixture of materials used to repair cavities on a single surface of the tooth.

Annual benefit Limit

The maximum amount a plan will pay in a benefit year toward an adult member's dental care costs.

Coinsurance

Your share of the costs of a covered health care service, calculated as a percentage (for example, 20 percent) of the allowed amount for the service, is called coinsurance. You pay coinsurance plus any deductible you may owe. For example, if the health insurance plan's allowed amount for an office visit is \$100, and you have met your deductible for the year, your coinsurance payment of 20 percent would be \$20. The health insurance plan pays the rest of the allowed amount. The allowed amount is the amount the doctor or hospital has agreed to accept for the care provided.

Copayment

A fixed amount (for example, \$15) you pay for a covered health care service, usually when you receive the service. The amount can vary by the type of covered health care service.

Dental preferred provider organization (DPPO)

A type of dental plan product that delivers dental services to members through a network of contracted dental care providers and includes limited coverage of out-of-network services.

Dental health maintenance organization (DHMO)

A type of dental plan product that delivers dental services by requiring assignment to a primary dental care provider who is paid a capitated fee for providing all required dental services to the enrollee unless specialty care is needed. DHMOs require referral to specialty dental providers. These products do not include coverage of services provided by dental care providers outside the dental plan.

Extraction

The removal of a tooth.

Out-of-pocket maximum

The most you pay during a policy period (a calendar year) before your health insurance plan begins to pay 100 percent of the cost of covered services. This limit never includes your premium, balance-billed charges or health care your health insurance plan doesn't cover. Some health insurance plans don't count all out-of-network payments toward this limit.

Root canal

A dental procedure to fix a damaged nerve of a tooth by removing the nerve and filling it with suitable material.

Waiting period

The length of time a newly-enrolled adult member must wait before the dental plan pays toward major dental services.



CoveredCA.com