



PBA 600
Retiree Voluntary Benefits
PPO Plus Premier



CAPITAL BENEFITS, LLC
For more information call or email
Toll Free Number: 833-888-0542
Email: info@capitalbenefitsinc.com

Plan Highlights

Lifetime Deductible – \$100 (once per lifetime as long as Policy is in force – Does not apply to Preventive and Diagnostic)

No Waiting Period – During Open Enrollment (within 90 days of New Membership)

Calendar Year Maximum	Premium Plan	Standard Plan	Basic Plan
	\$2,000	\$1,500	\$1,000

PPO Plus Premier Benefits*

Preventive & Diagnostic	Premium Plan	Standard Plan	Basic Plan
Dental Evaluations	100%	100%	100%
Routine Cleanings	100%	100%	100%
Biteewing X-rays	100%	100%	100%
Full-mouth X-rays (a series of individual X-rays or a panoramic X-ray)	100%	100%	100%
Fluoride	100%	100%	100%
Sealants on the decay-free, biting surface of permanent molars	100%	100%	100%
Space maintainers when a primary molar tooth is prematurely lost	100%	100%	100%
Emergency treatment to relieve pain	100%	100%	100%
Basic Services			
Composite (tooth colored) fillings or Amalgam (silver) fillings on any teeth	80%	80%	50%
Non-surgical extractions	50%	50%	50%
Major Services			
Crowns – Repair of teeth with crowns when they cannot be restored with other filling materials	50%	50%	50%
Endodontics – The care of teeth with damaged nerves, such as root canal treatment	50%	50%	50%
Periodontics – The treatment of diseases of the gums and supporting bone, such as scaling and root planing	50%	50%	50%
Oral Surgery – Surgical extractions and other dental surgery	50%	50%	50%
Fixed and Removable Prosthodontics – Dental Services and appliances to replace missing teeth, such as dentures and bridges (excluding implants), including repairs	50%	50%	50%
Implants – Dental Services for surgical placement of implant body and implant abutment supported crowns	50%	50%	50%
Adjunctive General Services – Dental Services include general anesthesia, and palliative care (temporary treatment of dental pain)	50%	50%	50%

* The above PPO Plus Premier plans enable you to utilize any dentist of your choice but you will save the most money by using participating Delta Dental Premier or Delta Dental PPO dentists. If you utilize dentists that do not participate in one of Delta Dental's networks you will be responsible for your coinsurance and the difference between Delta Dental's approved fee and the submitted charge of the dentist.

Additional Services	Premium Plan	Standard Plan	Basic Plan
Oral Health Enhancement	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Integrative Care	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

Monthly Rates (Valid for 1/1/2022 through 12/31/2023)	Premium Plan \$2,000 Calendar Year Maximum	Standard Plan \$1,500 Calendar Year Maximum	Basic Plan \$1,000 Calendar Year Maximum
Retiree only	\$62.08	\$59.02	\$48.19
Retiree plus spouse	\$115.74	\$110.02	\$89.83
Retiree plus child(ren) - end of month to age 26	\$152.38	\$144.86	\$118.26
Family	\$201.22	\$191.31	\$156.19

Open Enrollment and Eligibility Rules Apply Open Enrollment

You may enroll and select any of the three retiree dental plans during the initial open enrollment period for plans effective 01/01/2022.

Your plan will be effective the first of the month after your application is received and approved. The enrollment contract term is 24 months.

If coverage is not elected during open enrollment you will not be able to enroll until the next enrollment period and will have a 12 month waiting period on Major Services for the Premium and Standard plans. The Basic Plan does not have any waiting periods.

Ongoing Enrollment

Retirees who join NJSPBA Local 600 may enroll and select any of the three retiree plans upon the date of membership or within (90) days of joining the NJSPBA Local 600. Benefits will be effective the first of the month following the date of enrollment.

If you are a PBA 600 member enrolled in COBRA or another qualifying dental insurance plan prior to enrolling in the PBA 600 retiree plan

You will have the option to enroll within 90 days in any of the three retiree dental plans upon termination of the COBRA or qualifying dental plan. Benefits will be effective the first of the month following the date of enrollment upon validation of prior coverage.

If you do not enroll upon eligibility or upon termination of COBRA or another qualifying dental plan, a 12 month waiting period will apply to Major services for the Premium and Standard plan

If you don't enroll within the 90-day period following the date of your NJSPBA Local 600 membership, you will not be eligible to enroll until the next enrollment period and a 12-month waiting period will apply to Major Services for the Premium and Standard plans. No waiting period will apply to the Basic plan.

To enroll:

- Enroll online at www.DeltaDentalCoversMySmile.com/PBA600
- Call and enroll via phone at (844) 517-6453

Plan Changes after you are already enrolled in one of the PBA 600 retiree plans

Plan changes are allowed at the next annual enrollment period for an effective date of January 01 for the new plan.

Rate changes

You will be notified of rate changes approximately 90 days in advance.

Return Address PO Box 103, Stevens Point, WI 54481
Phone Sales: 844-517-6453
 Service: 888-899-3734
 Fax: 800-807-1970
www.DeltaDentalCoversMySmile.com/PBA600

