

## Carrier Contact Information

### Prepaid Dental Plans

DeltaCare USA  
P.O. Box 1803  
Alpharetta, GA 30023  
(800) 422-4234  
[www.deltadentalins.com/state](http://www.deltadentalins.com/state)

MetLife\*  
P.O. Box 14401  
Lexington, KY 40512-4401  
(800) 880-1800  
[www.metlife.com/safeguard/soc](http://www.metlife.com/safeguard/soc)

Premier Access  
8890 Cal Center Drive  
Sacramento, CA 95826  
(888) 534-3466  
[www.socdhmo.com](http://www.socdhmo.com)

Western Dental  
530 South Main Street, 1st Floor  
Orange, CA 92868  
(866) 859-7525  
[www.westerndental.com/state-of-ca](http://www.westerndental.com/state-of-ca)

### Delta Dental Plans

Delta Dental  
P.O. Box 997330  
Sacramento, CA 95899-7330  
(800) 225-3368  
[www.deltadentalins.com/state](http://www.deltadentalins.com/state)

\*Benefits provided by SafeGuard Health Plans, Inc., a MetLife company.



Benefits Division  
1515 S Street, North Building, Suite 500  
Sacramento, California 95811-7258  
(916) 322-0300  
[www.calhr.ca.gov](http://www.calhr.ca.gov)

## 2021 Dental Plans

### for Active Employees

You and your dependents may be eligible for state-sponsored dental insurance, available from one of several dental plans. Eligible employees may enroll in a dental plan within the first 60 days of employment, when newly eligible, or during the annual Open Enrollment period. Changes in coverage are also permitted during Open Enrollment.

Your collective bargaining designation determines which plans are available to you. The state pays all or part of your premium, depending on the plan you select and the number of dependents you wish to cover. There are three types of dental plans available, prepaid, indemnity, and a preferred provider option:

#### Prepaid Plans:

##### **DeltaCare USA, MetLife,\* Premier Access, and Western Dental**

- The prepaid plans require you and your eligible dependents to use a dentist from a specific list of dentists who are located in California and who contract with your selected prepaid carrier.
- Dentists receive a flat fee for each member assigned to their offices.
- Most basic services are covered at no cost.
- The monthly premium is fully paid by the state—no premiums are deducted from your monthly pay warrant.

#### Indemnity Plans:

##### **Delta Dental PPO plus Premier Basic and Enhanced Plans—Group No. 9949**

- The indemnity plans allow you to select the dentist of your choice throughout the United States and worldwide without using a provider network.
- The plans limit the amount of paid coverage for each specific type of dental treatment. You pay any remaining balance due based on the type of dental treatment you receive.
- The amount of your monthly premium copayment is deducted from your monthly pay warrant according to the number of enrolled dependents.

#### Preferred Provider Option:

##### **Delta Dental Preferred Provider Option (PPO)—Group No. 9946**

- The preferred provider option plan provides services through its network of participating dentists and allows you to see any dentist of your choice throughout the United States and worldwide and still be covered.
- Your present dentist may be a PPO member of Delta Dental; however, not all Delta Dental contracted Dentists are members of the PPO network. If you receive services outside of the PPO network, your share of the dentist's fees will be substantially higher. You may contact Delta Dental to ensure there is a PPO provider available in your service area.
- Your cost for services is based on a fee-for-service agreement between Delta Dental and the PPO provider. The plan limits paid coverage for each specific type of dental treatment. You pay any remaining balance due based on the type of dental treatment you receive.
- The amount of your monthly premium copayment is deducted from your monthly pay warrant according to the number of enrolled dependents.

The tables on the following pages will help you compare coverage and costs.



CALIFORNIA DEPARTMENT OF HUMAN RESOURCES  
Benefits Division

additional information located at

[www.calhr.ca.gov](http://www.calhr.ca.gov)

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## Coverage and Costs for Certain Procedures

Prepaid Plans	DeltaCare USA, MetLife,* Premier Access, and Western Dental (Standard)	MetLife* (Enhanced)
<b>Who is Eligible?</b>	Represented Employees and Dependents	Excluded Employees and Dependents
<b>Diagnostic and Preventive Benefits</b> (two cleanings annually)	No charge	No charge*
<b>Basic Benefits</b>	No charge	No charge
<b>Crowns</b>	\$50	No charge
<b>Bridges, Full and Partial Dentures</b>	\$65 and up	No charge
<b>Implants</b>	<b>Premier Access and Western Dental only</b>	Not covered
<b>Orthodontia</b>	\$1,000, plus up to \$250 for start-up costs	\$1,000, plus up to \$250 for start-up costs

\*Benefits provided by SafeGuard Health Plans, Inc., a MetLife company. MetLife (Enhanced) provides the availability for a third cleaning to the employee and all enrolled dependents.

Indemnity and PPO Plans	Delta Dental PPO plus Premier Basic No. 9949	Delta Dental PPO plus Premier Basic No. 9949	Delta Dental PPO plus Premier Enhanced No. 9949	Delta Dental PPO In-Network <sup>1</sup> (PPO Dentists) No. 9946	Delta Dental PPO Out-of-Network (non-PPO Dentists) No. 9946
<b>Who is Eligible?</b>	Represented Employees	Dependents of Represented Employees	Excluded Employees and Dependents	Employees and Dependents	Employees and Dependents
<b>Diagnostic and Preventive Benefits</b> (two cleanings annually)	No charge <sup>2</sup>	No charge <sup>2</sup>	No charge <sup>2</sup>	No charge <sup>2,3</sup>	20% <sup>3</sup>
<b>Basic Benefits</b>	10%	20%	10%	10%	20%
<b>Crowns</b>	20%	50%	20%	20%	50%
<b>Bridges, Full and Partial Dentures</b>	50%	50%	50%	40%	50%
<b>Implants</b>	Not covered	Not covered	Not covered	50% (\$2,500 Lifetime maximum)	50% (\$2,500 Lifetime maximum)
<b>Orthodontia</b>	50%	50%	50%	50%	50%
<b>Lifetime Orthodontia Maximum</b>	\$1,000	\$1,000	\$1,000	\$1,000 adult/ \$1,500 children	\$1,000 adult/ \$1,000 children
<b>Annual Deductible</b>	\$50	\$50 person/ \$150 family	\$25 person/ \$100 family	\$25 person/ \$100 family	\$75 person/ \$200 family
<b>Annual Maximum</b>	\$2,000	\$1,000 per person	\$2,000 per person	\$2,000 per person	\$1,000 per person

1. The level of benefits and covered services are based on services provided by a PPO plan dentist; for services provided by a non-PPO plan dentist, the level of benefits is lower.
2. Diagnostic and preventive benefits are exempt from the deductible.
3. The PPO includes a third cleaning for high-risk patients.

## 2021 Dental Premiums

The following tables show dental premiums effective January 1, 2021. For employees in Consolidated Benefits (CoBen), the state share and employee share does not apply. Therefore, the total dental premium will be deducted from the monthly CoBen allowance.

### Prepaid Dental Plans

The state will pay 100 percent of the premium for employees not in CoBen.

Level of Coverage	DeltaCare USA	MetLife* Standard	MetLife* Enhanced	Premier Access	Western Dental
<b>Party Code 1</b>	\$19.44	\$15.74	\$16.06	\$15.48	\$15.77
<b>Party Code 2</b>	\$31.90	\$25.50	\$27.18	\$25.08	\$26.02
<b>Party Code 3</b>	\$44.13	\$35.71	\$33.48	\$35.12	\$36.91

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### Delta Dental PPO plus Premier Basic Plan for Represented Employees—Group No. 9949

Level of Coverage	State Share	Employee Share	Total Premium
<b>Party Code 1</b>	\$38.12	\$12.71	\$50.83
<b>Party Code 2</b>	\$66.56	\$22.19	\$88.75
<b>Party Code 3</b>	\$96.21	\$32.07	\$128.28

### Delta Dental PPO plus Premier Enhanced Plan for Excluded Employees—Group No. 9949

Level of Coverage	Total Premium
<b>Party Code 1</b>	\$52.87
<b>Party Code 2</b>	\$104.06
<b>Party Code 3</b>	\$146.18

### Delta Dental Preferred Provider Option (PPO) for Excluded and Represented Employees—Group No. 9946

Level of Coverage	State Share	Employee Share	Total Premium
<b>Party Code 1</b>	\$34.84	\$11.61	\$46.45
<b>Party Code 2</b>	\$67.73	\$22.58	\$90.31
<b>Party Code 3</b>	\$101.91	\$33.97	\$135.88

### Union-Sponsored Dental Plans

Employees in BUs 5 and 6 should contact their Benefit Trust for information on their union-sponsored dental plan premiums and benefits.

### For More Information

For more information on dental plans, please contact your personnel office or visit [www.calhr.ca.gov](http://www.calhr.ca.gov). Please consult each dental plan's evidence of coverage for detailed information and plan limitations. To obtain a list of each plan's member dentists please call or visit the websites of the plans listed on the back of this brochure.