

Optional Dental Benefits *(Benefits and Dues Effective January 1, 2012)*

Depending on where you live, you are eligible for one of the following:

- Dual Option — DMO (Dental Maintenance Organization) or PPO (Preferred Provider Organization)
- PPO Option
- Passive PPO

Benefit Design

	DMO	PPO		Passive PPO
Plan Reimbursement		Network	Out of Network	
Preventive services	100%	100%	100%	100%
Basic services	100%	80%	70%	80%
Major services	60%	60%	40%	60%
Copay	\$0	\$0	\$0	\$0
Annual plan maximum	None	\$2,000	\$1,000	\$2,000
Plan deductible	None	\$50	\$100	\$50
Family deductible	None	\$100	\$200	\$100
Orthodontia (children only)	Yes	Yes	Yes	Yes
Orthodontia benefit	50%	50%	50%	50%
Deductible	None	\$50	\$100	\$50
Lifetime maximum	None	\$2,000	\$1,000	\$2,000

Monthly Dues

	DMO	PPO/Passive PPO
Member	\$23.78	\$30.03
Member & Spouse	\$48.57	\$61.31
Member & Children	\$63.87	\$79.13
Member & Family	\$89.23	\$110.55

Electing dental coverage during an open enrollment period is generally considered late entry and subjects members to limited preventive services. Please visit Pensions.org for more information.

If any discrepancy exists between this product sheet and the official Benefits Plan document, the official plan document governs. Call the Board of Pensions at 800-773-7752 (800-PRESPLAN), or access the website at Pensions.org, for a copy of this official document.

The Optional Dental Program is administered by Aetna Insurance Company. Members can call Aetna's customer service at 800-843-3661 for provider information, identification cards, and other customer service-related issues.