Laborers Health and Welfare Trust Fund for Northern California
Comparison of Dental Plans for Retired Participants
Effective March 1, 2009

Plan Features	Delta Dental of California		Delta Care USA
	Delta Dental Premier	*Delta Dental PPO*	
Type of Plan	Traditional FEE-FOR-SERVICE Plan. You may select any dentist, however, your out-of-pocket costs is greater if you use a non-Delta Dental Premier dentist.	PPO Plan. Dentists in the Delta Dental PPO Plan negotiate fees that are even lower than the Delta Dental Premier Plan.	Pre-paid HMO type Plan. You select a Delta Care dentist who provides all services including referrals to Specialists.
Area Covered	More than 9,000 Northern California Delta Dental Premier dentists.	For list of PPO dentists in your area, call Delta Dental at 1-800-765-6003. (Network is limited).	Dental Offices throughout Northern California. Call 1-800-422-4234 for a Delta Care dentist in your area.
Choice of Dentists	Any dentist, however, you pay less out-of-pocket costs when you use a Delta Dental Premier dentist because fees are pre-negotiated and dentist cannot charge more than the pre-negotiated amount.	Visit a Delta Dental PPO dentist for lower out-of-pocket costs. You are free to use any dentist though you pay lower out-of-pocket costs when you use a Delta Dental Premier dentist and even lower costs when you use a PPO dentist.	Delta Care USA dentist only. All services and referrals must be provided by a Delta Care dentist. No benefits will be paid if dental services are performed by other than a Delta Care dentist.
Plan Year Deductible	$50 per person $150 per family Diagnostic and preventative services not subject to Plan Year Deductible.	$50 per person $150 per family Diagnostic and preventative services not subject to Plan Year Deductible.	None
Plan Year Maximum	$2,500 per person	$2,500 per person	No maximum
Out of Pocket Costs	100% payable for diagnostic and preventative services. 70% payable of usual, customary and reasonable (UC&R) charges for major services.	100% payable for diagnostic and preventive services. 70% payable of usual, customary and reasonable (UC&R) charges for major services.	Minimal copayments
Orthodontic Benefits	Not covered	Not covered	Start up fee of $350.00. Coverage for adults is up to $1,800.00 and children is up to $1,600.00.