



Washington Small Group Dental Plan Designs

2-9 standard					
Plan design name	Deductible	OV copay	Coinsurance Prev/Basic/Major	Calendar year max	Ortho coverage
Opt 1; DMO copay 64	None	\$0	Per schedule	N/A	None
Opt 3; FoC DMO copay (DMO 56 & PPO)	DMO; None	\$0	Per schedule	N/A	None
	PPO max; \$50/\$150	N/A	In: 100/80/50 Out: 100/80/50	\$1,000	None
Opt 4: Active PPO max	\$50/\$150	N/A	In: 100/90/60 Out: 100/80/50	\$1,500	None
Opt 5: PPO max 1000	\$50/\$150	N/A	100/80/50	\$1,000	None
Opt 6: PPO max 1500	\$50/\$150	N/A	100/80/50	\$1,500	None
Opt 7: PPO 1000 80th	\$50/\$150	N/A	100/80/50	\$1,000	None
Opt 8: PPO 1500 90th	\$50/\$150	N/A	100/80/50	\$1,500	None
Opt 9: PPO 1500b 80th	\$50/\$150	N/A	100/80/50	\$1,500	None
Opt 10: PPO 2000 90th	\$50/\$150	N/A	100/80/50	\$2,000	None

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Washington Small Group Dental Plan Designs

3-9 Voluntary					
Plan design name	Deductible	OV copay	Coinsurance Prev/Basic/Major	Calendar year max	Ortho coverage
Opt 1; DMO copay 64	None	\$0	Per schedule	N/A	None
Opt 3; FoC DMO copay (DMO 56 & PPO)	DMO; None PPO max; \$75/\$225	\$0 N/A	Per schedule In: 100/80/50 Out: 100/80/50	N/A \$1,000	None None
Opt 4: Active PPO max	\$75/\$225	N/A	In: 100/90/60 Out: 100/80/50	\$1,500	None
Opt 5: PPO max 1000	\$75/\$225	N/A	100/80/50	\$1,000	None
Opt 6: PPO max 1500	\$75/\$225	N/A	100/80/50	\$1,500	None
Opt 7: PPO 1000 80th	\$75/\$225	N/A	100/80/50	\$1,000	None
Opt 8: PPO 1500 90th	\$75/\$225	N/A	100/80/50	\$1,500	None
Opt 9: PPO 1500b 80th	\$75/\$225	N/A	100/80/50	\$1,500	None
Opt 10: PPO 2000 90th	\$75/\$225	N/A	100/80/50	\$2,000	None

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10+ Standard						
Plan design name	Deductible	OV copay	Coinsurance Prev/Basic/Major	Calendar year max	Ortho coverage	Ortho lifetime max
Opt 6a: PPO max 1500	\$50/\$150	N/A	100/80/50	\$1,500	None	N/A
Opt 6a: PPO max 1500 ortho	\$50/\$150	N/A	100/80/50	\$1,500	50%	\$1,000
Opt 8a: PPO 1000 80th	\$50/\$150	N/A	100/80/50	\$1,000	None	N/A
Opt 8a: PPO 1000 80th ortho	\$50/\$150	N/A	100/80/50	\$1,000	50%	\$1,000
Opt 9a: PPO 1000 90th	\$50/\$150	N/A	100/80/50	\$1,000	None	N/A
Opt 9a: PPO 1000 90th ortho	\$50/\$150	N/A	100/80/50	\$1,000	50%	\$1,000
Opt 10a: PPO 1500 80th	\$50/\$150	N/A	100/80/50	\$1,500	None	N/A
Opt 10a: PPO 1500 80th ortho	\$50/\$150	N/A	100/80/50	\$1,500	50%	\$1,000
Opt 11a: PPO 1500 90th	\$50/\$150	N/A	100/80/50	\$1,500	None	N/A
Opt 11a: PPO 1500 90th ortho	\$50/\$150	N/A	100/80/50	\$1,500	50%	\$1,000
Opt 13a: PPO 2000S 90th	\$50/\$150	N/A	100/90/60	\$2,000	None	N/A
Opt 13a: PPO 2000S 90th ortho	\$50/\$150	N/A	100/90/60	\$2,000	50%	\$1,000
Opt 15b: PPO 2500P 90th	\$50/\$150	N/A	100/80/50	\$2,500	None	N/A
Opt 15b: PPO 2500P 90th ortho	\$50/\$150	N/A	100/80/50	\$2,500	50%	\$1,000

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Washington Small Group Dental Plan Designs

10+ Voluntary						
Plan design name	Deductible	OV copay	Coinsurance Prev/Basic/Major	Calendar year max	Ortho coverage	Ortho lifetime max
Opt 6a: PPO max 1500	\$50/\$150	N/A	100/80/50	\$1,500	None	N/A
Opt 6a: PPO max 1500 ortho	\$50/\$150	N/A	100/80/50	\$1,500	50%	\$1,000
Opt 8a: PPO 1000 80th	\$50/\$150	N/A	100/80/50	\$1,000	None	N/A
Opt 8a: PPO 1000 80th ortho	\$50/\$150	N/A	100/80/50	\$1,000	50%	\$1,000
Opt 9a: PPO 1000 90th	\$50/\$150	N/A	100/80/50	\$1,000	None	N/A
Opt 9a: PPO 1000 90th ortho	\$50/\$150	N/A	100/80/50	\$1,000	50%	\$1,000
Opt 10a: PPO 1500 80th	\$50/\$150	N/A	100/80/50	\$1,500	None	N/A
Opt 10a: PPO 1500 80th ortho	\$50/\$150	N/A	100/80/50	\$1,500	50%	\$1,000
Opt 11a: PPO 1500 90th	\$50/\$150	N/A	100/80/50	\$1,500	None	N/A
Opt 11a: PPO 1500 90th ortho	\$50/\$150	N/A	100/80/50	\$1,500	50%	\$1,000
Opt 13a: PPO 2000S 90th	\$50/\$150	N/A	100/90/60	\$2,000	None	N/A
Opt 15b: PPO 2500P 90th	\$50/\$150	N/A	100/80/50	\$2,500	None	N/A
Opt 15b: PPO 2500P 90th ortho	\$50/\$150	N/A	100/80/50	\$2,500	50%	\$1,000

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