

SMALL BUSINESS PROGRAM

For Group Size 5-99 Eligible Employees

| BENEFITS | PPO 1 | PPO 2 | PPO 3 | PPO 4 |
|---|----------------------------|-----------------------------|-----------------------------|-----------------------------|
| Diagnostic (deductible waived) ➤ Exams (2 per calendar year) ➤ Bitewing x-rays (2 per calendar year) | 100%* | 100%* | 100%* | 100%* |
| Preventive (deductible waived) ➤ Prophylaxis (cleaning) (2 per calendar year) ➤ Fluoride treatments (to age 19) ➤ Sealants (to age 14) ➤ Space maintainers (to age 14) ➤ Pregnancy benefit (additional oral evaluation and choice of periodontal scaling, root planing or prophylaxis, or additional periodontal maintenance procedure) | 100%* | 100%* | 100%* | 100%* |
| Basic Restorative ➤ Fillings (amalgam “silver” and composite “white” non-molar) | 50%* | 80%* | 80%* | 80%* |
| Oral Surgery ➤ Extraction and oral surgery procedures, including pre- and post-operative care ➤ General anesthesia is covered when used in conjunction with covered oral surgical procedures | not a benefit | 80%* | 80%* | 80%* |
| Endodontics ➤ Pulpal therapy ➤ Root canal | not a benefit | 80%* | 80%* | 80%* |
| Periodontics ➤ Treatment to the gums and supporting structures of the teeth | not a benefit | 80%* | 80%* | 80%* |
| Major Restorative ➤ Inlays ➤ Onlays ➤ Crowns | not a benefit | not a benefit | 50%* | 50%* |
| Prosthodontics ➤ Procedures for replacement of missing teeth by construction or repair of bridges and partial or complete dentures | not a benefit | not a benefit | 50%* | 50%* |
| Implants | not a benefit | not a benefit | 50%* | 50%* |
| Orthodontics ➤ Straightening of teeth (dependent children to age 19) ➤ \$1,000 lifetime maximum | not a benefit | not a benefit | not a benefit | 50%* |
| Calendar year deductibles | \$25 Single \$75 Family | \$50 Single \$150 Family | \$50 Single \$150 Family | \$50 Single \$150 Family |
| Calendar year maximum per person | \$1,000 | \$1,500 | \$1,500 | \$1,500 |

Major Restorative, Prosthodontics, Implants and Orthodontics – There is a six-month waiting period on major restorative, prosthodontic, implant and orthodontic services for groups with fewer than 25 employees and no prior coverage.

*The Delta Dental PPO program makes its payments for both participating and non-participating dentists based on the Delta Dental PPO Maximum Plan Allowances (PPO MPA) or the dentist’s charged fee, whichever is less (PPO Allowed Amount). Delta Dental PPO participating dentists agree to accept the PPO Allowed Amount as payment in full. Delta Dental’s benefit is a percentage of the PPO Allowed Amount; an enrollee copayment may be required. Deductibles may also apply. Dentists who participate in the Delta Dental Premier[®] network but not the Delta Dental PPO network may also charge the patient the difference between the PPO Allowed Amount and the Delta Dental Premier Allowed Amount. Non-participating dentists may balance bill the patient without limit by Delta Dental.

This information highlights coverage for the PPO 1, PPO 2, PPO 3, and PPO 4 dental programs; this highlight sheet is not intended to be a complete list or complete description of benefits. Exclusions and limitations may apply.

The benefit explanations contained herein are subject to all provisions of the Group Dental Contract, and do not modify such contract in any way, nor shall the enrollee accrue any rights because of any statement in or omission from this highlight sheet.

Small Business Program

Rates for Group Size 5-99 Eligible Employees

Monthly Rates Valid for Effective Dates of January 1, 2014 through December 1, 2014*

See Underwriting Policies and Requirements for eligible industries based on SIC code

| PA AREA 1: EASTERN REGION (Bucks, Chester, Delaware, Lehigh, Montgomery, Northampton and Philadelphia counties) | | | | | | | | |
|--|---------|---------|---------|---------|---------|---------|---------|---------|
| TIER STRUCTURE | PPO 1 | | PPO 2 | | PPO 3 | | PPO 4 | |
| | Level 1 | Level 2 | Level 1 | Level 2 | Level 1 | Level 2 | Level 1 | Level 2 |
| Employee Only | \$12.83 | \$14.75 | \$19.86 | \$22.84 | \$29.47 | \$33.89 | \$29.47 | \$33.89 |
| Employee & Family | \$34.39 | \$39.55 | \$52.14 | \$59.96 | \$69.97 | \$80.47 | \$75.00 | \$86.25 |
| Employee Only | \$12.83 | \$14.75 | \$19.86 | \$22.84 | \$29.47 | \$33.89 | \$29.47 | \$33.89 |
| Employee & 1 Dep. | \$24.89 | \$28.62 | \$37.93 | \$43.62 | \$56.58 | \$65.07 | \$58.06 | \$66.77 |
| Employee & Family | \$40.29 | \$46.33 | \$60.96 | \$70.10 | \$78.28 | \$90.02 | \$85.51 | \$98.34 |
| PA AREA 2: CENTRAL/NORTHEASTERN/WESTERN REGIONS | | | | | | | | |
| TIER STRUCTURE | PPO 1 | | PPO 2 | | PPO 3 | | PPO 4 | |
| | Level 1 | Level 2 | Level 1 | Level 2 | Level 1 | Level 2 | Level 1 | Level 2 |
| Employee Only | \$12.15 | \$13.97 | \$18.75 | \$21.56 | \$27.96 | \$32.15 | \$27.96 | \$32.15 |
| Employee & Family | \$32.58 | \$37.47 | \$49.34 | \$56.74 | \$66.19 | \$76.12 | \$70.90 | \$81.54 |
| Employee Only | \$12.15 | \$13.97 | \$18.75 | \$21.56 | \$27.96 | \$32.15 | \$27.96 | \$32.15 |
| Employee & 1 Dep. | \$23.57 | \$27.11 | \$35.81 | \$41.18 | \$53.68 | \$61.73 | \$55.08 | \$63.34 |
| Employee & Family | \$38.17 | \$43.90 | \$57.74 | \$66.40 | \$73.95 | \$85.04 | \$80.72 | \$92.83 |

*Rates guaranteed for 12 months from the effective date. Monthly rates are based on the location of the group's headquarters.

Group Contribution and Participation Requirements for Delta Dental PPO:

- Rates require that the employer will contribute at least 50% of the cost of the plan (no more than 50% contribution by employee) and that there will be no less than 75% enrollment of all eligible employees and no less than 50% enrollment of their dependents.
- Rates require a minimum enrollment of 5 employees.
- Employer can offer PPO with DeltaCare[®] USA as a Dual Choice, requiring a total enrollment of 10 employees – at least 5 enrolled in each plan.

Benefit Limitations:

- Dependents are covered to age 26.
- For PPO 4 program: Standard benefit of \$1,000 lifetime maximum for Orthodontic services may be reduced by any amounts benefited for orthodontic services under previous dental plans.

For groups with 5 to 24 primary enrollees:

- New groups of 5 to 24 subscribers are subject to a 6-month waiting period from the group's effective date for Major Restorative, Prosthodontic, Implant and Orthodontic benefits. The waiting period will be waived for groups with proof of prior Major Restorative, Prosthodontic, Implant and Orthodontic coverage.

For groups with 25 to 99 primary enrollees:

- New groups of 25 to 99 enrollees are not subject to the 6-month waiting period for Major Restorative, Prosthodontic, Implant or Orthodontic benefits.

SMALL BUSINESS PROGRAM

Most businesses qualify for Level One rates. However, please consult the following listing to see if your business qualifies for Level One or Level Two rates.

Eligible Industries

| Level One | SIC Code |
|--|--|
| Advertising (except Misc. not classified #7319) | 7311-7313 |
| Agriculture, Forestry, Fishing (except seasonal employees) | 0100-0999 |
| Auto Rental Agencies | 7513-7519 |
| Automobile Parking Services | 7521 |
| Building Maintenance/Equipment Rental | 7349-7359 |
| Collection Agencies & Credit Reporting Services | 7322-7323 |
| Communication (Radio, Telephone, TV/Radio Broadcasting) | 4800-4899 |
| Community Service Organizations/ Social Services | 8300-8499 |
| Computer Programming & Related Services | 7371-7379 |
| Construction Contractors | 1500-1799 |
| Direct Mailing, Reproductions, Secretarial Services | 7331-7338 |
| Disinfecting & Pest Control Services | 7342 |
| Electrical Repair (Radio, TV, A/C, Refrigerator) | 7622-7629 |
| Engineering & Management Services | 8711-8748 |
| Finance (Banks, Securities, Credit Agencies) | 6000-6299 |
| Funeral Services & Crematories | 7261 |
| Furniture Repair/Reupholstery | 7641 |
| Government-Funded Groups | 8300-8499 |
| Hospitals | 8062-8069 |
| Independent Auto Repair & Services | 7532-7599 |
| Laundry/Garment Services/ Shoe Repair Shops | 7211-7219/7251 |
| Manufacturing (except Jewelry Manufacturing) | 2000-2699 |
| Manufacturing (Chemicals, Allied and Other Products) | 2810-3999 |
| Mining, Oil and Gas Extraction | 1000-1499 |
| Misc. Computer Services | 7379 |
| Misc. Repair (Welding, etc.) | 7692-7699 |
| Museum Art Galleries & Gardens | 8412, 8422 |
| News Syndicates | 7384, 7383 |
| Photofinishing Labs | 7384 |
| Printing & Publishing | 2700-2799 |
| Public & Private Schools (Elementary & High School) | 8200-8299 |
| Public Administration (Cities, Counties, Police, etc.) | 9000-9720, 9722-9998 |
| Retail | 5200-5510, 5610-5699, 5712-5736, 5912-5999 |
| Security Systems, Detectives, Armored Cars | 7381-7382 |
| Transportation | 4000-4799 |

| Level One Continued | SIC Code |
|---------------------|-----------|
| Utilities | 4900-4999 |
| Wholesale Trade | 5000-5199 |

| Level Two | SIC Code |
|--|-----------------------|
| Advertising, Misc. not classified | 7319 |
| Amusement, Recreation & Entertainment | 7800-7999 |
| Auto Dealerships | 5511-5599 |
| Hotels | 7000-7099 |
| Insurance Carriers/Brokers | 6300-6499 |
| Jewelry Manufacturing | 3911-3915 |
| Legal | 8100-8199 |
| Management Carve-out (regardless of industry) | 9999 |
| Medical Groups | 8000-8059 & 8082-8099 |
| Photographic Studios | 7221 |
| Real Estate | 6500-6799 |
| Religious Organizations | 8661 |
| Restaurants | 5800-5899 |
| Tax Return Preparation Services/ Misc. Personal Services | 7291-7299 |
| Watch, Clock & Jewelry Repair | 7631 |

| Ineligible Industries | SIC Code |
|---|------------------|
| Associations and Trusts ¹ (except #8661) | 8600-8699 |
| Beauty & Barber Shops | 7231-7241 |
| Dental Offices, Dental Labs and Medical Labs | 8021, 8071, 8072 |
| Employment Agencies | 7361-7363 |
| High Turnover ² | Varies |
| International Affairs | 9721 |
| Misc. Business Services | 7389 |
| Misc. Services not elsewhere classified | 8999 |
| Partnerships | no SIC |
| Private Households | 811 |
| Seasonal Employees (Christmas, Part-time help) | no SIC |
| Seasonal Employees (Agriculture) | 0761-0783 |

¹ Management and the Administrative staff of Associations and Trusts are eligible under Level 1. Use SIC Code 8741.

² A business has "high turnover" if 20% or more of the average number of its employees during the past 12 months were newly hired for reasons other than the growth of the business.

Delta Dental PPOSM plus Premier and Delta Dental PPO Limitations and Exclusions

1. Services or supplies which are provided to patient by any federal or state government agency or by any municipality, county, or other political subdivision.
2. Charges for which benefits or services are provided to the patient by any hospital, medical or dental service corporation, any group insurance, franchise, or other prepayment plan for which an employer, union, trust or association makes contributions or payroll deductions (unless the coordination of benefit provisions provide otherwise).
3. Procedures to correct congenital or developmental malformations except for children eligible at birth.
4. Treatments or devices that increase the vertical dimension of an occlusion, restore an occlusion to normal, replace tooth structure lost by attrition or erosion, or otherwise.
5. Treatments or supplies primarily for cosmetic purposes.
6. Services provided or supplies furnished or devices started prior to the effective eligibility date of a patient.
7. Preventive plaque control programs, including oral hygiene programs.
8. Periodontal splinting, equilibration and gnathological recordings.
9. Myofunctional therapy.
10. Temporomandibular joint dysfunction, unless covered under the group contract.
11. Implant services are not a benefit under PPO plus Premier 1, PPO plus Premier 2, PPO 1 and PPO 2.
12. Prescription drugs, pre-medication, and relative analgesias.
13. Treatment or supplies for which the patient would have no legal obligation to pay in the absence of this or any other similar coverage.
14. Experimental procedures.
15. General anesthesia, except with covered oral surgery procedures of one or more simple extractions and/or with surgical extractions for patients under age 19; and except with three or more simple extractions and/or surgical extractions for patients age 19 and over.
16. Major Restorative services, inlays, onlays and crowns are not a benefit under PPO plus Premier 1, PPO plus Premier 2, PPO 1 and PPO 2.
17. Prosthodontic services, including bridges and dentures, are not a benefit under PPO plus Premier 1, PPO plus Premier 2, PPO 1 and PPO 2.
18. Orthodontic services, including tooth guide appliances, are not a benefit under PPO plus Premier 1, PPO plus Premier 2, PPO plus Premier 3, PPO 1, PPO 2 and PPO 3.
19. Oral Surgery services, including extractions, are not a benefit under PPO plus Premier 1 and PPO 1.
20. Endodontic services, including pulp therapy and root canals, are not a benefit under PPO plus Premier 1 and PPO 1.
21. Periodontic services, including treatment to the gums, are not a benefit under PPO plus Premier 1 and PPO 1.
22. Adult Orthodontics.
23. Prophylaxis and exams are a benefit twice in any calendar year period.
24. Bitewing x-rays are a benefit twice in any calendar year period.
25. Full mouth x-rays are a benefit once in any three (3) year period.
26. Sealants are a benefit, limited to age fourteen (14), once in any thirty-six (36) month period on unfilled permanent first and second molars.
27. Episodes of surgical periodontal treatment must be separated by a period of no less than five (5) years to qualify the patient for additional periodontal benefits.
28. Substandard work until corrected.