

Overview of 2021 Dental and Vision Options

<p style="text-align: center;">Delta Dental PPO Plus Premier Dental Plan</p> <p>Group Numbers:</p> <p style="padding-left: 20px;">Union Staff: 6350-9900</p> <p style="padding-left: 20px;">Dept of Corrections: 6350-9901</p> <p style="padding-left: 20px;">Correctional Industries 6350-9905</p> <p style="padding-left: 20px;">Bristol County: 6350-9903</p> <p style="padding-left: 20px;">Plymouth County: 6350-9904</p> <p style="padding-left: 20px;">Dukes County: 6350-9905</p> <p style="padding-left: 20px;">State Police: 6350-9907</p>	<p>This plan combines two of Delta Dental's national dental networks, Delta Dental PPO and Delta Dental Premier giving you access to more dentists than ever. Most dentists in the country participate in one or both networks. Your plan covers services provided by non-participating dentists as well.</p> <p>The Delta Dental PPO Plus Premier Plan will pay a percentage of your services as follows:</p> <p><u>Type I services</u> Covered at 100% Preventative and Diagnostic services including: Oral exams, bitewing X-rays, and teeth cleaning two times per year; full mouth X-rays every 60 months, fluoride treatments for members under age 19; sealants for members through age 15</p> <p><u>Type II services</u> Covered at 80% Restorative Services including: Fillings, oral surgery/extractions, periodontics, endodontics, prosthetic maintenance, emergency dental care, general anesthesia</p> <p><u>Type III services</u> Covered at 70% Major Restorative Services including: Prosthodontics, fixed bridges and crowns</p> <p><u>Orthodontics</u> Covered at 50% to a separate lifetime maximum of \$2,000 Orthodontia is available only for children under age 19</p> <p>Calendar Year Maximum Payment for Type I, II, III Services: \$1,250 per person</p>
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<p style="text-align: center;"><u>Vision Option 1</u></p> <p style="text-align: center;">EyeMed Vision Plan Group # 9737008</p>	<p>The EyeMed Vision Plan provides you with quality vision care and prescription eyewear through a large network of optometrists and ophthalmologists, and nationwide locations including Pearle Vision, Sears Optical, Lens Crafters and Target Optical. For the nearest location, call their toll-free customer service number at (866) 299-1358, or visit their website at: www.enrollwiththeyemed.com/select.</p> <p>With your basic benefits, eligible members and covered dependents may receive an eye exam, eyeglass lenses and contact lenses every 12 months. New eyeglass frames may be obtained every 24 months.</p> <p>For upgraded lenses you need only pay co-pays for the following options: Polarized Lens - \$60 co-pay. High Index Lens - \$55 co-pay. Plastic Photochromatic / Transition Lens - \$65 co-pay. Photogray Lens - \$20 co-pay.</p> <p>Your plan allows a \$1,000 lifetime allowance towards the cost of LASIK or PRK surgery for you and your eligible spouse. You may use in-network or out-of-network providers, however, additional pre-negotiated discounts are available with in-network providers. To locate an in-network provider near you, call: 1-877-5LASER6. (877-552-7376)</p>
<p style="text-align: center;"><u>Vision Option 2</u></p> <p style="text-align: center;">Correctional</p>	<p>With the Massachusetts Correction Industries Voucher Plan, you may order prescription eyewear for yourself and covered dependents once every 24 months through the Massachusetts Correctional Industries.</p>

**Industries
Voucher
Plan**

To use the plan, you must obtain a voucher (good for 45 days) worth up to **\$150** by calling Benefit Strategies at (800) 346-4935.

Non-prescription sunglasses are not eligible for reimbursement for any reason.

Vouchers for prescription eyewear will be accepted only at the following site:

NCCI Optical Lab in Gardner, MA