Dental Plans

As a VyStar member, you are eligible to enroll in the DeltaCare USA Plan offered by VyStar Financial Group.

DeltaCare USA

With the DeltaCare USA Plan, members pay a low monthly premium, then reduced fees for services based on rates that Delta Dental negotiates in advance.

Plan Highlights

- No claim forms
- No deductibles
- No annual dollar maximums
- Access to specialty care
- Professional treatment standards
- Orthodontic discounts available to covered dependents and adults

Limitations and Exclusions

- You must receive treatment from your assigned network facility in order to receive benefits. Your facility may refer you to a network specialist for specialty care.
- Once you are eligible on the plan, you will receive an identification card and a Certificate of Coverage booklet describing your benefits.
- You can make an appointment once you have received confirmation of your enrollment.
- You will be assigned to a facility based on your zip code.
- Delta Dental must receive the DeltaCare USA enrollment materials and/or the facility change request by the 15th day of the month for coverage to be effective the 1st day of the following month.

DeltaCare USA Sample Benefits

<table>
<thead>
<tr>
<th>Service</th>
<th>You Pay</th>
<th>Waiting Period</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cleaning (1110)</td>
<td>$0.00</td>
<td>None</td>
</tr>
<tr>
<td>Filling (2140)</td>
<td>$44.00</td>
<td>None</td>
</tr>
<tr>
<td>Crown (2750)</td>
<td>$485.00</td>
<td>None</td>
</tr>
<tr>
<td>Root Canal (3330)</td>
<td>$470.00</td>
<td>None</td>
</tr>
</tbody>
</table>

Plan Maximum: None
Office Co-Pay: $5.00
Deductible: None

FAQ - DeltaCare USA

- How many cleanings a year are covered with this plan?
  Three cleanings per 12 month period.
- Are cosmetic procedures covered?
  No, cosmetic procedures are not covered.

- Is there a waiting period?
  No, there is no waiting period.

- Is this insurance?
  Yes.

- Can I change my Contract Dentist once I am in the plan?
  No, after your effective date you may change your Contract Dentist by contacting customer service or visiting www.deltadentalins.com. Changes must be requested by the 15th of the month to be effective on the 1st day of the following month.

- Does the plan cover orthodontic treatment?
  Yes, orthodontic discounts are available under this plan.

- Are specialty services covered?
  Yes, specialty services are covered under this plan.

- Are there any limitations on out-of-network services?
  Yes, out-of-network services are not covered.

- What if I need to make changes to my coverage (example: add or remove a dependent/spouse)?
  You can call your plan administrator/Morgan-White at 1-888-859-3795.

- Who is eligible for coverage under this plan?
  Generally, any individual who is 18 years of age or older, their spouse and the eligible dependents.

Eligible dependents include:
1. Spouse (unless legally separated or divorced)
2. Unmarried children from birth to age 19 and dependent grandchildren to age 18 months.
3. Unmarried children from age 19 to the end of the calendar year in which they turn age 25.
4. They are supported by the Eligible Person/Primary Enrollee, and
5. They either live in the Enrollee’s household, or
6. They are enrolled as full-time or part-time students in an accredited school.

- What are my options for selecting an Effective Date?
  Effective dates are always the 1st of the month. Incomplete enrollment forms or failure to submit the required initial premium amount may cause an initial delay in issuance of insurance.

- Will I be able to cancel the dental plan after I have enrolled?
  Yes, your coverage may be cancelled with 30 days written notice.

- What should I expect to see on my VyStar Statement/Credit Card Statement for my premium payments?
  DENTAL 1800-800-1397 will appear on your statement as the charge for your premium.

- Can I change my payment type from monthly to another available option (quarterly, semi-annually)?
  Yes.

- When will my account be debited/drafted?
  Your account will be debited/drafted between the 18th and 23rd of each month.

- What if I need to make changes to my coverage (example: add or remove a dependent/spouse)?
  You can call your plan administrator/Morgan-White at 1-888-859-3795.
Delta Dental PPO

The Delta Dental PPO Plan allows you the freedom to visit any licensed dentist. It is to your advantage, however, to use a Delta Dental PPO dentist because he/she will:

• Provide treatment to you at reduced fees, which means your share of the bill will usually be lower;
• Not bill you above Delta Dental's approved amount;
• Submit all claims directly to Delta Dental;
• Only charge you the patient’s share at the time of visit; and
• Wait for reimbursement.

This represents a summary of benefits. More information is available on our website, www.vystarcu.org/home/products/dental. Complete information regarding limitations and exclusions will be included in the contract and member booklets.

You will usually pay the lowest amount for services when you visit a Delta Dental dentist.

PPO dentists agree to accept a reduced fee, and your out-of-pocket charges are usually lowest when visiting a Delta Dental PPO dentist. You are charged only the patient’s share at the time of treatment. Delta Dental pays its portion directly to the dentist.

Delta Dental dentists will complete claim forms and submit them for you at no charge.

You are responsible for the difference between the amount Delta Dental pays and the amount of your out-of-pocket costs when visiting an out-of-network dentist. Your dentist may require you to pay the entire amount of the bill in advance and wait for reimbursement.

You may have to complete and submit your own claim forms or pay your non-Delta Dental dentist a service fee to submit them for you.

*Limitations may apply for some benefits. Please refer to your Evidence of Coverage for a list of benefit limitations and exclusions.

FAQ - Delta Dental PPO

• How are claims processed? Yes.
• Are there any waiting periods? No.
• Is there a waiting period? No.
• Is there any deductible? No.
• Do we need to obtain claim forms? Yes.
• Can I change my payment type from monthly to another available option once I am in the plan? Yes.
• When will my account be debited/drafted? Your account will be debited/drafted between the 18th and 23rd of each month.
• What if I need to make changes to my coverage? You can call your plan administrator/Morgan-White at 1-888-859-3795.
• What is eligible for coverage under this plan? Generally, any individual who is 18 years of age or older, their spouse and their eligible dependents.

Eligible Dependents include:

1. Spouse (living legally separated or divorced)
2. Children from birth to the end of the calendar year in which occurs their 25th birthday if:
   a. The child is dependent on the eligible person/Primary Enrollee for support; and
   b. The child is a full-time or part-time student.
3. Children include children under the age of 19, or who are a full-time or part-time student.
4. Legal dependents and/or children at least 19 months old.

• What are my options for selecting an Effective Date? You can call your plan administrator/Morgan-White at 1-888-859-3795.
• What should I expect to see on my VyStar Statement/Credit Card Statement for my premium payments? Your account will be debited/drafted between the 18th and 23rd of each month.
• Can I change my payment type from monthly to another available option once I am in the plan? Yes.

Delta Dental PPO Sample Benefits

<table>
<thead>
<tr>
<th>Service Categories</th>
<th>Plan Pays Year 1</th>
<th>Plan Pays Year 2</th>
<th>Plan Pays Year 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Preventative</td>
<td>80%</td>
<td>90%</td>
<td>100%</td>
</tr>
</tbody>
</table>

Type 1 - Preventative Services

- Includes services such as cleanings, exams, and basic procedures.
- Delta Dental pays its portion directly to the dentist.
- You are responsible for the difference between the amount Delta Dental pays and the amount of your out-of-pocket costs when visiting a Delta Dental network dentist.
- Your dentist may require you to pay the entire amount of the bill in advance and wait for reimbursement.

Type 2 - Basic Procedures

- Includes services such as restorative and basic procedures.
- Delta Dental pays its portion directly to the dentist.
- You are responsible for the difference between the amount Delta Dental pays and the amount of your out-of-pocket costs when visiting a Delta Dental network dentist.
- Your dentist may require you to pay the entire amount of the bill in advance and wait for reimbursement.

Type 3 - Major Procedures

- Includes services such as oral surgery and major procedures.
- Delta Dental pays its portion directly to the dentist.
- You are responsible for the difference between the amount Delta Dental pays and the amount of your out-of-pocket costs when visiting a Delta Dental network dentist.
- Your dentist may require you to pay the entire amount of the bill in advance and wait for reimbursement.

Type 4 - Orthodontia

- Includes services such as orthodontia and orthopedic treatment.
- Delta Dental pays its portion directly to the dentist.
- You are responsible for the difference between the amount Delta Dental pays and the amount of your out-of-pocket costs when visiting a Delta Dental network dentist.
- Your dentist may require you to pay the entire amount of the bill in advance and wait for reimbursement.

Delta Dental PPO Plan offered by VyStar Financial Group.