2025 Dental Plans

for Active Employees

You and your dependents may be eligible for state-sponsored dental insurance available from one of several dental plans. Eligible employees may enroll in a dental plan within the first 60 days of employment, when newly eligible or during the annual Open Enrollment period. Changes in coverage are also permitted during Open Enrollment.

Your collective bargaining designation determines which plans are available to you. The state pays all or part of your premium, depending on the plan you select and the number of dependents you wish to cover. There are three types of dental plans available:

Prepaid Plans:

DeltaCare USA, MetLife, Premier Access and Western Dental

- The prepaid plans require you and your eligible dependents to use a dentist from a specific list of dentists who are located in California and who contract with your selected prepaid carrier.
- Dentists receive a flat fee for each member assigned to their offices.
- Most basic services are covered at no cost.

Indemnity Plans:

Delta Dental PPO plus Premier Basic and Enhanced Plans—Group No. 9949

- The indemnity plans allow you to select the dentist of your choice throughout the United States and worldwide.
- You have access to the Delta Dental PPO and Premier networks; however, you will usually save the
 most when you visit a PPO dentist. You will generally have the highest out-of-pocket costs when you
 visit a non-Delta Dental dentist.
- The plans limit the amount of paid coverage for each specific type of dental treatment. You pay any remaining balance due based on the type of dental treatment you receive.

Preferred Provider Organization (PPO):

Delta Dental PPO—Group No. 9946

- The PPO plan provides services through its network of participating dentists and allows you to see any dentist of your choice throughout the United States and worldwide and still be covered.
- Your present dentist may be a PPO member of Delta Dental; however, not all Delta Dental
 contracted dentists are members of the PPO network. If you receive services outside of the PPO
 network, your share of the dentist's fees may be substantially higher. You may contact Delta Dental
 to ensure there is a PPO provider available in your service area.
- When using a PPO provider, your cost for services is based on a fee-for-service agreement between Delta Dental and the PPO provider. The plan limits paid coverage for each specific type of dental treatment. You pay any remaining balance due based on the type of dental treatment you receive.

The tables on the following pages will help you compare coverage and costs.



Benefits Division

Coverage and Costs for Certain Procedures

| Prepaid Plans | DeltaCare USA, MetLife Standard, Premier Access and Western Dental | MetLife Enhanced |
|---|--|--|
| Who is Eligible? | Employees and Dependents | Excluded Employees and Dependents |
| Diagnostic and Preventive Benefits (two cleanings annually) | No charge | No charge ¹ |
| Basic Benefits | No charge | No charge |
| Crowns | \$50 | No charge |
| Bridges, Full and Partial Dentures | \$65 and up | No charge |
| Implants | Premier Access and Western Dental only | Not covered |
| Orthodontia | \$1,000, plus up to \$250 for start- up costs | \$1,000, plus up to \$250 for start- up costs |

| Indemnity and PPO Plans | Delta Dental PPO plus Premier Basic No. 9949 | Delta Dental PPO plus Premier Basic No. 9949 | Delta Dental PPO plus Premier Enhanced No. 9949 | Delta Dental PPO In-Network ² (PPO Dentists) No. 9946 | Delta Dental PPO Out-of-Network (non-PPO Dentists) No. 9946 |
|--|--|--|---|--|--|
| Who is Eligible? | Represented Employees | Dependents of Represented Employees | Excluded Employees and Dependents | Employees and Dependents | Employees and Dependents |
| Diagnostic and Preventive Benefits (two cleanings annually) | No charge ^{3,4} | No charge ^{3,4} | No charge ^{3,4} | No charge ^{3,4} | 20%4 |
| Basic Benefits | 10% | 10% | 10% | 10% | 20% |
| Crowns | 20% | 50% | 20% | 20% | 50% |
| Bridges, Full and Partial Dentures | 50% | 50% | 50% | 40% | 50% |
| Implants⁵ | 50% | 50% | 50% | 50% | 50% |
| Orthodontia | 50% | 50% | 50% | 50% | 50% |
| Lifetime Orthodontia Maximum | \$1,000 | \$1,000 | \$1,000 | \$1,000 adult/ \$1,500 children | \$1,000 adult/ \$1,000 children |
| Annual Deductible | \$50 | \$50 person/ \$150 family | \$25 person/ \$100 family | \$25 person/ \$100 family | \$75 person/ \$200 family |
| Calendar Year Maximum (CYM) | \$2,000 | \$1,500 per person | \$2,000 per person | \$2,000 per person | \$1,000 per person |

¹ MetLife Enhanced provides the availability for a third cleaning to the employee and all enrolled dependents.

² The level of benefits and covered services are based on services provided by a PPO plan dentist; for services provided by a non-PPO plan dentist, the level of benefits is lower.

Diagnostic and preventive benefits are exempt from the deductible.
 Includes a third cleaning for high-risk patients.
 Implants subject to the CYM.

2025 Dental Premiums

The following tables show dental premiums effective January 1, 2025. For employees in Consolidated Benefits (CoBen), the state share and employee share do not apply, and the total dental premium will be deducted from the monthly CoBen allowance.

Prepaid Dental Plans

The state will pay 100% of the premium for employees who are not in CoBen.

| Level of Coverage | DeltaCare USA | MetLife Standard | MetLife Enhanced | Premier Access | Western Dental |
|----------------------|------------------|---------------------|---------------------|-------------------|-------------------|
| Employee Only | \$19.44 | \$13.85 | \$16.06 | \$14.21 | \$15.77 |
| Employee + 1 | \$31.90 | \$22.44 | \$27.18 | \$23.02 | \$26.02 |
| Employee + Family | \$44.13 | \$31.42 | \$33.48 | \$32.24 | \$36.91 |

Delta Dental PPO plus Premier Basic Plan for Represented Employees—Group No. 9949

| Level of Coverage | State Share | Employee Share | Total Premium |
|-------------------|-------------|----------------|---------------|
| Employee Only | \$36.98 | \$12.33 | \$49.31 |
| Employee + 1 | \$64.58 | \$21.52 | \$86.10 |
| Employee + Family | \$93.33 | \$31.11 | \$124.44 |

Delta Dental PPO plus Premier Enhanced Plan for Excluded Employees—Group No. 9949

| Level of Coverage | Total Premium | |
|-------------------|---------------|--|
| Employee Only | \$51.29 | |
| Employee + 1 | \$100.95 | |
| Employee + Family | \$141.81 | |

Delta Dental PPO for Excluded and Represented Employees—Group No. 9946

| Level of Coverage | State Share | Employee Share | Total Premium |
|-------------------|-------------|----------------|---------------|
| Employee Only | \$33.80 | \$11.26 | \$45.06 |
| Employee + 1 | \$65.71 | \$21.90 | \$87.61 |
| Employee + Family | \$98.87 | \$32.95 | \$131.82 |

Union-Sponsored Dental Plans

Employees in bargaining units 5 and 6 should contact their Benefit Trust for information on their union- sponsored dental plan premiums and benefits.

For More Information

For more information on dental plans, please contact your departmental personnel office or visit the CalHR Benefits website. Please consult each dental plan's evidence of coverage for detailed information and plan limitations. To obtain a list of each plan's member dentists please call or visit the websites of the plans listed on the back of this brochure.

Carrier Contact Information

Prepaid Dental Plans

DeltaCare USA P.O. Box 1803 Alpharetta, GA 30023 (800) 422-4234 deltadentalins.com/state

MetLife P.O. Box 14410 Lexington, KY 40512-4401 (800) 880-1800 metlife.com/safeguard/soc

Premier Access 8890 Cal Center Drive Sacramento, CA 95826 (888) 534-3466 Fax: (877) 648-7748 socdhmo.com

Western Dental Plan 530 South Main Street, 1st Floor Orange, CA 92868 (866) 859-7525 westerndental.com/state-of-ca

Delta Dental Plans

Delta Dental P.O. Box 997330 Sacramento, CA 95899-7330 (800) 225-3368 deltadentalins.com/state



Benefits Division 1515 S Street, North Building, Suite 500 Sacramento, California 95811-7258 (916) 322-0300 CalHR.ca.gov