## RETIREES DENTAL PLAN DELTA DENTAL of WASHINGTON GROUP 09353

You have available a dental plan from Washington Dental Service/Delta Dental of Washington that is developed specifically for you, the retired City or County employee.

The sponsor to this dental plan is the Washington State Retired Officers Association which is an association of retired police officers throughout the state. They are retired officers from any city or county entity.

If you enroll and you have a working spouse that has dental coverage through his/her employer, they do not have to enroll. They may, however, enroll at the time they drop off of their employer dental plan. No dependent can be the principal enrollee. This is a dental plan for retirees and their eligible dependents.

Payment levels

| Class I - Diagnostic & Preventive<br>Exams, Cleanings, Fluoride, Sealants           |                      | 100%   |          |  |
|---|----------------------|--|----------|--|
| Class II - Restorative  |                      | 70% if PPO dentist is used.                        |          |  |
| Restorations, Extractions, Oral Surgery   |                      | Otherwise 50%                                      |          |  |
| Class III - Endodontics, Periodontics, Prosthodontics<br>Crowns, Bridges & Dentures |                      | 50%  |          |  |
| Deductible (Waived on Class I benefits)   |                      | \$75 per person / per year<br>\$225 family maximum |          |  |
| Annual Maximum Benefit (January 1 through December 31)                              |                      | \$1500 per person / per year                       |          |  |
| The monthly payments for Enrollee:  |                      |  | \$71.00  |  |
| Calendar year 2024 are:   | Enrollee + spouse:   |  | \$135.00 |  |
| 9 1960 0 1970 1970 1970 1970 1970 1970 1970 1                                       | Enrollee + child(ren | ):   | \$124.00 |  |
|   | Enrollee + spouse +  | child(ren):  | \$186.00 |  |

The City of Seattle Pension Administration System requires you send three months payment with your enrollment form to the following address. On the enrollment form you must specify the "Effective Date" you want your coverage to start. Future payments will be handled by the City of Seattle Benefits Unit from your pension check.

Make your check payable to Independent Billing Service and mail to:

Independent Billing Service P O Box 7756 Bonney Lake, WA 98391 (253) 862-2122

A brief summary of benefits is as follows: