

**Central Region School Insurance Group
2012 Dental Pool Rates
PPO Plans**

CRSIG/Delta Preferred Provider Option (PPO) Plan (UCR) Fee Concept CRSIG/Delta Preferred Provider Option, PPO	Co-Payments	
		In Network Plan/Patient
	Diagnostic & Preventive	100 60/40
	Other Basic Services	100 60/40
	Crowns & Cast Restoration	100 60/40
Dental Accident	100 60/40	
Prosthodontics	50/50 50/50	

\$1,000 Maximum per Patient per Calendar Year		ONE PARTY	TWO PARTY	THREE PARTY	COMPOSITE
	Active Employees and Dependents	\$46.71	\$82.42	\$117.35	\$92.09
	Retirees	\$48.57	\$94.64	\$114.26	N/A

\$2,000 Maximum per Patient per Calendar Year		ONE PARTY	TWO PARTY	THREE PARTY	COMPOSITE
	Active Employees and Dependents	\$49.64	\$87.57	\$123.34	\$96.83
	Retirees	\$51.72	\$99.06	\$119.65	N/A

Orthodontic Add-In Costs, 50/50 Co-Payment Applies
 (These options may be added to the base plans above to determine enhanced plan rates)

\$2,000 Lifetime Maximum Children and Adult		ONE PARTY	TWO PARTY	THREE PARTY	COMPOSITE
	Active Employees and Dependents	\$1.67	\$4.87	\$21.93	\$12.99
	Retirees	\$1.67	\$5.34	\$24.97	N/A

\$2,000 Lifetime Maximum Children Only		ONE PARTY	TWO PARTY	THREE PARTY	COMPOSITE
	Active Employees and Dependents	N/A	\$1.86	\$18.70	\$10.18
	Retirees	N/A	\$2.11	\$21.48	N/A

\$500 Lifetime Maximum Children Only		ONE PARTY	TWO PARTY	THREE PARTY	COMPOSITE
	Active Employees and Dependents	N/A	\$0.61	\$5.96	\$3.23
	Retirees	N/A	\$0.67	\$6.86	N/A

0% Increase