

Denton ISD Dental RFP #1902-09 Plan Comparison

Grand Total	Cigna Current			Cigna Renewal			Lincoln Financial			Delta Dental			Unum				Beam Dental				
Dental	DHMO	Low Option 1	High Option	DHMO	Low Option 1	High Option	Low Option 1	Low Option 2	High Option	Low Option 1	High Option	DHMO	Low Option 1	Low Option 2	High Option	DHMO	Low Option 1	Low Option 2	High Option		
NETWORK REIMBURSEMENT & RC																					
In-Network Percentile	Refer to PDXVO TX	Contracted Fees	Contracted Fees	Refer to PDXVO TX	Contracted Fees	Contracted Fees	Fee Schedule	Fee Schedule	Fee Schedule	PPO	PPO/Premier	Please refer to DeltaCare USA's Limitations and Exclusions in Delta Dental's Proposal.	Fee schedule	Fee schedule	Fee schedule	Fee schedule	PPOFee	PPOFee	PPOFee		
Out-of-Network Percentile	Not applicable	90	90	Not applicable	90	90	Fee Schedule	50th	70th	PPO	90th	Please refer to DeltaCare USA's Limitations and Exclusions in Delta Dental's Proposal.	90th percentile	90th percentile	90th percentile	In-Network fee schedule	PPOFee	PPOFee	90th UCR		
MISC.																					
Endo/Perio: (Basic or Major)	Refer to P5IOX	Major	Basic	Refer to P5IOX	Major	Basic	Perio maintenance is under basic; all other perio and endo not covered by this plan	Major	Oral surgery is in basic but all other endo/perio in major	Please refer to attachment, Benefit Deviations.	Please refer to attachment, Benefit Deviations.	Please refer to DeltaCare USA's Limitations and Exclusions in Delta Dental's Proposal.	Basic	Major	Major	Major	Major	Major	Basic		
Dependent Age Eligibility:	Refer to P5IOX	26	26	Refer to P5IOX	26	26	26	26	26	26	Please refer to attachment, Benefit Deviations.	Please refer to attachment, Benefit Deviations.	Please refer to DeltaCare USA's Limitations and Exclusions in Delta Dental's Proposal.	To age 26	To age 26	To age 26	To age 26	Through the age of 26	Through the age of 26	Through the age of 26	
Implants Covered	No	No	No	No	No	No	no	no	yes	Not covered.	Not covered.	Please refer to DeltaCare USA's Limitations and Exclusions in Delta Dental's Proposal.	Endosteal implants (in lieu of an approved 3-unit bridge)	Endosteal implants (in lieu of an approved 3-unit bridge)	Endosteal implants (in lieu of an approved 3-unit bridge)	Endosteal implants (in lieu of an approved 3-unit bridge)	Yes	Yes	Yes		
Missing Tooth Provision		Standard	Standard		Standard	Standard	Not Included	Not Included	Not Included	Not covered.	Not covered.	Please refer to DeltaCare USA's Limitations and Exclusions in Delta Dental's Proposal.	included	included	included	included	No	No	No		
Late Entrant Penalty		Payment will be reduced by 50% for Class III services for 12 months for eligible members that are allowed to enroll in this plan outside of the designated open enrollment period. This provision does not apply to new hires.	Payment will be reduced by 50% for Class III services for 12 months for eligible members that are allowed to enroll in this plan outside of the designated open enrollment period. This provision does not apply to new hires.		Payment will be reduced by 50% for Class III services for 12 months for eligible members that are allowed to enroll in this plan outside of the designated open enrollment period. This provision does not apply to new hires.	Payment will be reduced by 50% for Class III services for 12 months for eligible members that are allowed to enroll in this plan outside of the designated open enrollment period. This provision does not apply to new hires.	Not Included	Not Included	Not Included	Please refer to attachment, Benefit Deviations.	Please refer to attachment, Benefit Deviations.	Please refer to DeltaCare USA's Limitations and Exclusions in Delta Dental's Proposal.	Late entrants are subject to waiting periods. Plan members that waive coverage at initial enrollment (within 31 days of effective date) or in the new employee eligibility period and/or terminate coverage with Unum will have a 12-month waiting period applied to basic and major services and orthodontia upon re-applying.	Late entrants are subject to waiting periods. Plan members that waive coverage at initial enrollment (within 31 days of effective date) or in the new employee eligibility period and/or terminate coverage with Unum will have a 12-month waiting period applied to basic and major services and orthodontia upon re-applying.	Late entrants are subject to waiting periods. Plan members that waive coverage at initial enrollment (within 31 days of effective date) or in the new employee eligibility period and/or terminate coverage with Unum will have a 12-month waiting period applied to basic and major services and orthodontia upon re-applying.	Late entrants are subject to waiting periods. Plan members that waive coverage at initial enrollment (within 31 days of effective date) or in the new employee eligibility period and/or terminate coverage with Unum will have a 12-month waiting period applied to basic and major services and orthodontia upon re-applying.	Not offered	Not offered	Not offered		
Cards Mailed to Participant's Address	Yes			Yes			Yes	Yes	Yes	No	No	Yes.	Plan administrators can individually or batch print ID cards from Services. Dental plan members can print or email personalized ID cards from their member portal, www.AlwaysAssist.com, or email or present their ID cards to their dental provider directly from the AlwaysAssist mobile app.	Plan administrators can individually or batch print ID cards from Services. Dental plan members can print or email personalized ID cards from their member portal, www.AlwaysAssist.com, or email or present their ID cards to their dental provider directly from the AlwaysAssist mobile app.	Plan administrators can individually or batch print ID cards from Services. Dental plan members can print or email personalized ID cards from their member portal, www.AlwaysAssist.com, or email or present their ID cards to their dental provider directly from the AlwaysAssist mobile app.	Plan administrators can individually or batch print ID cards from Services. Dental plan members can print or email personalized ID cards from their member portal, www.AlwaysAssist.com, or email or present their ID cards to their dental provider directly from the AlwaysAssist mobile app.	Yes	Yes	Yes		
ADDITIONAL FEATURES																					
Broker Portal Access		www.CignaAccess.com	www.CignaAccess.com		www.CignaAccess.com	www.CignaAccess.com	Yes	Yes	Yes	Yes	Confirmed.	Confirmed.	Confirmed.	Yes	Yes	Yes	Yes	Yes	Yes	Yes	
Employee Portal Access		www.mycigna.com	www.mycigna.com		www.mycigna.com	www.mycigna.com	Yes	Yes	Yes	Yes	Confirmed.	Confirmed.	Confirmed.	Yes	Yes	Yes	Yes	Yes	Yes	Yes	
Smart Phone App	Yes	Yes	Yes		Yes	Yes	Yes	Yes	Yes	Yes	Confirmed.	Confirmed.	Confirmed.	Yes	Yes	Yes	Yes	Yes	Yes	Yes	
NO. OF PROVIDERS IN 20 MILE RADIUS																					
General Dentists	1416	42911	42911	1416	42911	42911	1810	1702	1098		*Please refer to attachment, GeoAccess Report, under the tab, Attachments.	*Please refer to attachment, GeoAccess Report, under the tab, Attachments.	*Please refer to attachment, GeoAccess Report, under the tab, Attachments.	Zip code 76501	Zip code 76501	Zip code 76501	Zip code 76501	1826	1826	1826	
Pediatric Dentists	142	2246	2246	142	2246	2246	78	73	30		*Please refer to attachment, GeoAccess Report, under the tab, Attachments.	*Please refer to attachment, GeoAccess Report, under the tab, Attachments.	*Please refer to attachment, GeoAccess Report, under the tab, Attachments.	8	8	8	8	8	91	91	91
Orthodontists	744	4402	4402	744	4402	4402	131	120	70		*Please refer to attachment, GeoAccess Report, under the tab, Attachments.	*Please refer to attachment, GeoAccess Report, under the tab, Attachments.	*Please refer to attachment, GeoAccess Report, under the tab, Attachments.	6	6	6	6	6	149	149	149
Oral Surgeons	514	2907	2907	514	2907	2907	61	61	41		*Please refer to attachment, GeoAccess Report, under the tab, Attachments.	*Please refer to attachment, GeoAccess Report, under the tab, Attachments.	*Please refer to attachment, GeoAccess Report, under the tab, Attachments.	6	6	6	6	6	79	79	79
Specialists-Other	842	3108	3108	842	3108	3108	65	61	40		*Please refer to attachment, GeoAccess Report, under the tab, Attachments.	*Please refer to attachment, GeoAccess Report, under the tab, Attachments.	*Please refer to attachment, GeoAccess Report, under the tab, Attachments.	Refer to GEO Access Report	Refer to GEO Access Report	Refer to GEO Access Report	Refer to GEO Access Report	407	407	407	
Provider Network Name	Cigna Dental Care Access (DHMO)	Cigna Dental Choice (DPPD)	Cigna Dental Choice (DPPD)	Cigna Dental Care Access (DHMO)	Cigna Dental Choice (DPPD)	Cigna Dental Choice (DPPD)	Lincoln Dental Connect	Lincoln Dental Connect	Lincoln Dental Connect	Delta Dental Premier, Delta Dental PPO	Delta Dental Premier, Delta Dental PPO	DeltaCare USA	Dentemax Plus/AlwaysCare	Dentemax Plus/AlwaysCare	Dentemax Plus/AlwaysCare	Dentemax Plus/AlwaysCare	Dentemax plus, connection dental	Dentemax plus, connection dental	Dentemax plus, connection dental		
4-TIER MONTHLY RATES																					
Employee Only	13.31	18.69	44.32	13.38	19.9	48.76	13.51	25.97	45.53	\$20.77	\$49.25	\$13.19	\$59.17	\$24.95	\$46.74	\$19.71	\$1.62	\$4.17	\$0.94		
Employee + Spouse	26.5	37.16	94.7	27.84	39.58	104.18	24.92	51.34	96.52	\$44.29	\$105.23	\$26.37	\$126.42	\$49.61	\$101.14	\$39.69	\$3.23	\$8.33	\$1.89		
Employee + Children	28.63	40.26	85.84	30.06	42.9	94.42	32.42	61.09	92.19	\$44.74	\$95.39	\$35.32	\$114.60	\$53.75	\$91.68	\$43.00	\$7.62	\$4.11	\$32.57		
Employee + Family	41.81	58.75	159.96	43.9	62.6	175.96	44.69	87.43	169.63	\$65.28	\$177.75	\$53.59	\$213.55	\$78.43	\$170.84	\$62.75	\$20.01	\$29.97	\$202.63		
Rate Guarantee (No. Years)				2Years	2 Years	2 Years	2 years	2 years	2 years	2 years	1 year	1 year	1 year	2 years	2 years	2 years	2	2	2		

Notes: Lincoln Does not offer a DHMO We were unable to include Option 3 within this worksheet as there were not enough columns available. Beam Does not offer a DHMO option