



Oklahoma Higher Education Employees Group OKHEEI

Renewal Effective Date: January 1, 2020

Plan Options:	Preventive	Low			High		
	Delta Dental PPO	Delta Dental PPO – Point of Service			Delta Dental PPO – Point of Service		
		PPO	Premier	OON	PPO	Premier	OON
Preventive/Diagnostic	100%*	100%	100%	100%	100%	100%	100%
Basic Restorative	80%*	75%* [◇]	70%* [◇]	70%* [◇]	85%* [◇]	70%* [◇]	70%* [◇]
Major Restorative	N/A	60%*	50%*	50%*	60%*	50%*	50%*
Orthodontic	N/A	N/A			50% (Child Only)**		
Per Person Per Calendar Year Deductible	\$50/100	\$100/\$200			\$50/\$150		
Annual Maximum	\$750 Per Person	\$1,000 Per Person			\$2,000 Per Person		
Orthodontic Maximum	N/A	N/A			Unlimited Per Child		

◇ Endodontic, periodontic, and oral surgery are payable as Class II Services. *Not available for Preventive Option.*

* Per Person Per Calendar Year deductible applies (not to exceed 3 individual deductibles).

** Covered for dependents children under age 26.

Note: Eligible employees are full-time employees. Dependent children may be covered until age 26.

Monthly Rates:

Employee Only	\$18.26	\$29.96	\$39.82
Employee + Spouse	\$37.52	\$64.28	\$79.60
Employee + 1 Child	\$30.24	\$44.06	\$58.64
Employee + Children	\$39.58	\$53.80	\$75.82
Family	\$60.18	\$90.10	\$119.56