



California - Area 2



|   | Base Plan                                     | Buy Up Options                  |                                 |
|---|---|---------------------------------|---------------------------------|
| Plan name   | <i>Preventive Plus</i>                        | <i>Network Select</i>           | <i>Optima Unlimited</i>         |
| Plan type   | PPO Max *                                     | PPO Max *                       | Passive PPO                     |
| Allowance   | Contract Fee                                  | Contract Fee                    | 80th U&C                        |
| Participation   | 40% Combined - all plans                      | 40% Combined - all plans        | 40% Combined - all plans        |
| Waiting periods   | 12 mos w/ no prior coverage                   | 12 mos w/ no prior coverage     | 12 mos w/ no prior coverage     |
| Minimum group size  | 3 Enrolled across all plans                   | 3 Enrolled across all plans     | 3 Enrolled across all plans     |
| Maximum group size  | Unlimited                                     | Unlimited                       | Unlimited                       |
| Network specifics   |   |                                 |                                 |
| California Network ( <i>Ameritas</i> )  | 18,600  | 18,600                          | No Network Restrictions         |
| National Network ( <i>Ameritas</i> )  | 97,270  | 97,270                          | No Network Restrictions         |
| Deductible  | \$15 / Calendar year / person                 | Annual (\$50/\$150)             | Annual (\$50/\$150)             |
| Annual maximum  | \$1,000 / Calendar Year<br>(\$500 Type 3 Max) | \$1,000 per Calendar Year       | \$1,000 per Calendar Year       |
| <b>PREVENTIVE CARE</b><br>(cleaning, exams, x-rays etc.)                            | 100%  | 100%                            | 100%                            |
| <b>BASIC SERVICES</b><br>(fillings, sealants, routine extractions etc.)             | 5%  | 80%                             | 80%                             |
| <b>MAJOR SERVICES</b><br>(crowns, bridges, dentures, root canals, gum disease etc.) | 5%  | 50%                             | 50%                             |
| Adult implants available  | Yes. Applies to Major Services.               | Yes. Applies to Major Services. | Yes. Applies to Major Services. |
| <b>OPTIONS</b>  |   |                                 |                                 |
| Add Orthodontics  | No Ortho Option                               | Available at additional cost    | Available at additional cost    |
| Move Endo & Perio to Type 2   | Not Applicable                                | Available at additional cost    | Available at additional cost    |
|   |   | \$1,000 max                     | \$1,000 max                     |
| Employee only   | \$21.59                                       | \$39.85                         | \$49.98                         |
| Employee + Spouse   | 42.99   | 79.72                           | 100.91                          |
| Employee + Child  | 42.99   | 79.72                           | 100.91                          |
| Family  | 73.92   | 124.86                          | 160.63                          |

\* Out of Network reimbursement based on contract fee.



**Notes:**

- Employers select the between Buy-up options along with Base Plan. Solera does not require minimum participation in any one plan, only 40% participation combined from plans selected.
- All plans under Triple Choice/Dual Option Plan are insurance plans administered by single carrier (Standard Insurance).
- Base Plan (Preventive Plus) is an insurance plan with paid benefits nationally.