

Dental Plan Listing

Test Group

Walnut Creek, Contra Costa, 94597
SIC:5621

Prepared by Cole Seeger

Effective October 01, 2021

Anthem Blue Cross - Platinum PPO 100/90/60 Active 50/2000 90th E&P Basic (3RGX) (5-50)	EE's Included: 7/7	\$750.82
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Employer Contribution - EE/Dep	Employer Cost	Employee Cost
\$90 / \$0	\$458.36	\$292.46

Employee Premium	Dependent Premium
\$458.36	\$292.46

Benefit	In Network	Out Network
Network Reimbursement Basis		90th percentile
Individual Deductible	\$50	\$50
Family Deductible	\$150	\$150
Annual Maximum	\$2,000	\$2,000
Preventive Paid At	100%	100%
Ded Waived for Prev	Yes	Yes
Basic Paid At	90% (Endo/Perio)	80% (Endo/Perio)
Major Paid At	60%	50%
Major Wait	None	None
Orthodontia Copay - Child	Not covered	Not covered
Orthodontia Copay - Adult	Not covered	Not covered
Orthodontia Wait	N/A	N/A
Orthodontia Annual Max	N/A	N/A
Orthodontia Lifetime Max	N/A	N/A

Name	Age	Dep Status	Zip	EE Rate	Dep Rate	Total Rate
Adamson, Adam	21	Employee	92123	\$65.48	\$0.00	\$65.48
Amerson, Amy	57	Employee/Spouse	94123	\$65.48	\$68.11	\$133.59
Bradley, Brad	31	Employee	94123	\$65.48	\$0.00	\$65.48
Christianson, Cathy	49	Employee	94597	\$65.48	\$0.00	\$65.48
Davidson, David	33	Family	94597	\$65.48	\$148.83	\$214.31
Edwards, Edward	30	Employee	92123	\$65.48	\$0.00	\$65.48
Rogers, Roger	46	Employee/Child	94597	\$65.48	\$75.52	\$141.00

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