# Delta Dental's Small Business Program

For groups with 2-99 enrolled employees California

Plan Year 2026

Si	ummary of PPO F	Plans and Benefits	(No waiting perio	d for any procedur	e)	
Plan	Delux	ke 300	Advantage 400		Core 201	
	PPO <sup>1</sup>		PF	PO <sup>1</sup>	PF	PO <sup>1</sup>
Benefits	PPO	Non-PPO	PPO	Non-PPO	PPO	Non-PPO
	Dentists	Dentists	Dentists	Dentists	Dentists	Dentists
Diagnostic & Preventive (D&P)	100%	100%	100%	100%	100%	100%
Basic (fillings, oral surgery, root canals perio and sealants)	90%	80%	80%	80%	80%	80%
Crowns, cast restorations and prosthodontics	60%	50%	50%	50%	0%	0%
Calendar Year Deductible	\$50 per enrollee/		\$50 per enrollee/		\$50 per enrollee/	
- waived for D&P	\$150 per family		\$150 per family		\$150 per family	
Calendar Year Maximum (per enrollee)	\$1,500		\$1,500		\$750	
Orthodontics (optional)	None		None		None	
Orthodontics Lifetime Maximum (per enrollee)	N/A		N/A		N/A	
	roups sized 2 to 4	eligible employee	s- Employer <u>contri</u>	bution of 0 to 49.9	%	
Industry	Level 1	Level 2	Level 1	Level 2	Level 1	Level 2
·	•	Reg	ion 1	•		•
One Party	\$66.29	\$79.58	\$56.48	\$67.80	\$28.96	\$34.73
Two Party	\$131.25	\$157.42	\$111.82	\$134.13	\$57.28	\$68.75
Three Party+	\$203.31	\$244.03	\$173.23	\$207.92	\$88.76	\$106.54
		Reg	ion 2			
One Party	\$68.14	\$81.81	\$58.06	\$69.70	\$29.77	\$35.72
Two Party	\$138.83	\$166.52	\$118.29	\$141.88	\$60.60	\$72.73
Three Party+	\$214.19	\$257.09	\$182.51	\$219.04	\$93.51	\$112.24
		Reg	ion 3			
One Party	\$57.77	\$69.33	\$49.21	\$59.08	\$25.23	\$30.28
Two Party	\$123.88	\$148.61	\$105.54	\$126.62	\$54.08	\$64.91
Three Party+	\$190.43	\$228.54	\$162.24	\$194.72	\$83.15	\$99.80
		Reg	ion 4			
One Party	\$67.57	\$81.10	\$57.58	\$69.10	\$29.52	\$35.40
Two Party	\$135.17	\$162.13	\$115.16	\$138.14	\$59.00	\$70.83
Three Party+	\$209.10	\$250.95	\$178.16	\$213.81	\$91.29	\$109.58
Grou		ligible employees-				
Industry	Level 1	Level 2	Level 1	Level 2	Level 1	Level 2
		Regi		<u> </u>		
One Party	\$57.15	\$68.60	\$53.28	\$63.96	\$27.32	\$32.77
Two Party	\$113.15	\$135.71	\$105.49	\$126.54	\$54.04	\$64.86
Three Party+	\$175.27	\$210.37	\$163.42	\$196.15	\$83.74	\$100.51
			ion 2			
One Party	\$58.74	\$70.52	\$54.78	\$65.75	\$28.09	\$33.69
Two Party	\$119.68	\$143.55	\$111.59	\$133.85	\$57.17	\$68.62
Three Party+	\$184.65	\$221.63	\$172.18	\$206.64	\$88.22	\$105.89
2 2 .	¢ 10 0-		ion 3	¢:	000.00	600 ==
One Party	\$49.80	\$59.77	\$46.43	\$55.74	\$23.80	\$28.57
·	0100 =0	0400 44	000 50	Φ440.4T	ΦE4 00	
Two Party Three Party+	\$106.79 \$164.16	\$128.11 \$197.02	\$99.56 \$153.05	\$119.45 \$183.70	\$51.02 \$78.44	\$61.24 \$94.15

6 B t	<b>\$50.05</b>	<b>\$20.00</b>	<b>\$54.00</b>	<b>\$05.40</b>	407.05	000.40
One Party Two Party	\$58.25 \$116.52	\$69.92 \$139.77	\$54.32 \$108.64	\$65.18 \$130.32	\$27.85 \$55.66	\$33.40 \$66.82
Three Party+	\$110.32 \$180.26	\$216.34	\$168.08	\$130.32	\$86.12	\$103.37
Tillee Party+	Groups sized 2 to 4			·		φ103.3 <i>1</i>
la di catin i	•	+	_	•		Lavel O
Industry	Level 1	Level 2	Level 1	Level 2	Level 1	Level 2
Ou - Port	Φ50.00		gion 1	Φ50.00	<b></b>	000.40
One Party	\$52.62	\$63.17	\$49.07	\$58.89	\$25.16	\$30.18
Two Party	\$104.18	\$124.96	\$97.13	\$116.52	\$49.76	\$59.73
Three Party+	\$161.39	\$193.71	\$150.48	\$180.61	\$77.11	\$92.55
On a Darte	Φ <b>54.40</b>		gion 2	<b>#</b> CO <b>F</b> F	фог o7	<b>#24.02</b>
One Party	\$54.10	\$64.93	\$50.44	\$60.55	\$25.87	\$31.03
Two Party	\$110.21	\$132.19	\$102.76	\$123.25	\$52.64	\$63.19
Three Party+	\$170.03	\$204.07	\$158.53	\$190.27	\$81.24	\$97.50
On a Darth	Φ4F 0F		gion 3	ΦΕ4.24	<b>CO4 O4</b>	¢00.00
One Party	\$45.85	\$55.04	\$42.75	\$51.31	\$21.91	\$26.30
Two Party	\$98.33	\$117.96	\$91.69	\$109.99	\$46.97	\$56.40
Three Party+	\$151.15	\$181.41	\$140.94 gion 4	\$169.15	\$72.22	\$86.69
On a Darth	ΦF2 C4	1	1	<b>#</b> CO 02	<b>\$05.05</b>	¢20.75
One Party	\$53.64	\$64.38	\$50.02	\$60.03	\$25.65 \$51.35	\$30.75
Two Party	\$107.30	\$128.70	\$100.04	\$120.00	\$51.25	\$61.52
Three Party+	\$165.98	\$199.20	\$154.77	\$185.73	\$79.30	\$95.19
	Groups sized 5 to 24	_	_	_		T
Industry	Level 1	Level 2	Level 1	Level 2	Level 1	Level 2
			gion 1	1 .		
One Party	\$51.95	\$62.36	\$48.43	\$58.15	\$24.84	\$29.79
Two Party	\$102.85	\$123.37	\$95.90	\$115.04	\$49.13	\$58.97
Three Party+	\$159.34	\$191.24	\$148.56	\$178.32	\$76.13	\$91.37
		1	gion 2			_
One Party	\$53.40	\$64.12	\$49.80	\$59.77	\$25.53	\$30.63
Two Party	\$108.80	\$130.51	\$101.44	\$121.69	\$51.97	\$62.39
Three Party+	\$167.87	\$201.48	\$156.52	\$187.85	\$80.19	\$96.26
		Re	gion 3	_		
One Party	\$45.27	\$54.34	\$42.21	\$50.67	\$21.63	\$25.96
Two Party	\$97.08	\$116.47	\$90.51	\$108.60	\$46.38	\$55.68
Three Party+	\$149.23	\$179.11	\$139.14	\$167.00	\$71.31	\$85.59
		Re	gion 4			
One Party	\$52.96	\$63.56	\$49.38	\$59.26	\$25.32	\$30.36
Two Party	\$105.93	\$127.07	\$98.76	\$118.47	\$50.60	\$60.75
Three Party+	\$163.87	\$196.67	\$152.80	\$183.37	\$78.30	\$93.97
	Groups sized 5 to 24	l eligible employee	s- Employer contr	ibution of 75% to 1	00%	
Industry	Level 1	Level 2	Level 1	Level 2	Level 1	Level 2
		Re	gion 1			
One Party	\$47.83	\$57.42	\$44.60	\$53.54	\$22.87	\$27.43
Two Party	\$94.70	\$113.61	\$88.31	\$105.92	\$45.23	\$54.30
Three Party+	\$146.72	\$176.10	\$136.80	\$164.20	\$70.10	\$84.14
		Re	gion 2			
One Party	\$49.18	\$59.03	\$45.85	\$55.05	\$23.51	\$28.20
Two Party	\$100.19	\$120.18	\$93.42	\$112.05	\$47.85	\$57.44
Three Party+	\$154.57	\$185.52	\$144.12	\$172.97	\$73.85	\$88.64
· · · · · · · · · · · · · · · · · · ·	•	Re	gion 3	-	-	-
One Party	\$41.68	\$50.04	\$38.87	\$46.66	\$19.92	\$23.91
Two Party	\$89.40	\$107.24	\$83.35	\$99.98	\$42.71	\$51.27
Three Party+	\$137.41	\$164.92	\$128.13	\$153.77	\$65.66	\$78.81
,	· · · · · · · · · · · · · · · · · · ·	·	gion 4			
One Party	\$48.77	\$58.53	\$45.47	\$54.58	\$23.31	\$27.95
Two Party	\$97.54	\$117.00	\$90.95	\$109.09	\$46.59	\$55.93
Three Party+	\$150.90	\$181.09	\$140.70	\$168.84	\$72.09	\$86.53
so i arty .	Groups sized 25+ e	·				<del>400.00</del>
	Oroupo dizou zoi C	Julio omployees	Limple you continue			
Industry	1 امدم 1	ר ובעם ו	ا ويرما 1	l evel 2	l evel 1	2 امدم ا
Industry	Level 1	Level 2	Level 1	Level 2	Level 1	Level 2

Two Party	\$87.42	\$104.86	\$81.52	\$97.78	\$41.76	\$50.12				
Three Party+	\$135.44	\$162.55	\$126.28	\$151.57	\$64.71	\$77.66				
Region 2										
One Party	\$45.39	\$54.50	\$42.33	\$50.80	\$21.70	\$26.04				
Two Party	\$92.48	\$110.93	\$86.22	\$103.44	\$44.17	\$53.03				
Three Party+	\$142.69	\$171.26	\$133.04	\$159.67	\$68.16	\$81.82				
	Region 3									
One Party	\$38.48	\$46.19	\$35.88	\$43.07	\$18.39	\$22.07				
Two Party	\$82.52	\$99.00	\$76.93	\$92.31	\$39.42	\$47.33				
Three Party+	\$126.85	\$152.24	\$118.27	\$141.95	\$60.61	\$72.75				
	Region 4									
One Party	\$45.02	\$54.03	\$41.97	\$50.37	\$21.52	\$25.81				
Two Party	\$90.04	\$108.01	\$83.95	\$100.70	\$43.01	\$51.64				
Three Party+	\$139.29	\$167.17	\$129.88	\$155.86	\$66.56	\$79.87				
Gr	Groups sized 25+ eligible employees- Employer contribution of 75% to 100%									
Industry	Level 1	Level 2	Level 1	Level 2	Level 1	Level 2				
		Reg	ion 1							
One Party	\$40.66	\$48.81	\$37.91	\$45.51	\$19.44	\$23.32				
Two Party	\$80.50	\$96.57	\$75.06	\$90.03	\$38.45	\$46.16				
Three Party+	\$124.71	\$149.69	\$116.28	\$139.57	\$59.59	\$71.52				
		Reg	ion 2							
One Party	\$41.80	\$50.18	\$38.97	\$46.79	\$19.98	\$23.97				
Two Party	\$85.16	\$102.15	\$79.41	\$95.24	\$40.67	\$48.82				
Three Party+	\$131.38	\$157.69	\$122.50	\$147.02	\$62.77	\$75.34				
	Region 3									
One Party	\$35.43	\$42.53	\$33.04	\$39.66	\$16.93	\$20.32				
Two Party	\$75.99	\$91.15	\$70.85	\$84.98	\$36.30	\$43.58				
Three Party+	\$116.80	\$140.18	\$108.91	\$130.70	\$55.81	\$66.99				
	Region 4									
One Party	\$41.45	\$49.75	\$38.65	\$46.39	\$19.81	\$23.76				
Two Party	\$82.91	\$99.45	\$77.31	\$92.73	\$39.60	\$47.54				
Three Party+	\$128.27	\$153.93	\$119.60	\$143.51	\$61.28	\$73.55				

Contact our sales team for quotes on optional features including additional Annual Maximums, Orthodontics, and D&P Maximum waiver.

This information is intended for use in conjunction with the Delta Dental Small Business Program marketing brochure. Please refer to the brochure for plan design information, summary of limitations and exclusions, and underwriting guidelines.

## Additional Information

Waiting period: Contribution of 0-49% - 12 month waiting period applies to endodontics, periodontics, oral surgery, major, and orthodontics services (if covered). May be waived for all initial enrollees and their dependents when this employer previously provided comprehensive dental coverage and there was no break in coverage. New hires and their dependents are subject to the waiting period.

Rate guarantee: 24 months for groups enrolling on or before December 1, 2026.

Broker commission: These rates include 10% flat broker commission and any applicable miscellaneous broker compensation.

# Region 1

This region includes ZIP codes: 900-908, 910-928 and 930

<u>The following ZIP codes are excluded:</u> 92222, 92227, 92231-92233, 92243-92244, 92249-92251, 92257, 92259, 92266, 92273, 92275, 92281, 92283, 92384, 92389, 93013, 93014, 93067

# Region 2

This region includes ZIP codes: 940-941, 943-949, 95002, 95008-009, 95011, 95013-015, 95020-021, 95026, 95030-033, 95035-038, 95042, 95044, 95046, 95050-056, 95070-071, 951

<u>The following ZIP codes are excluded:</u> 94503, 94508, 94510, 94512, 94515, 94533-94535, 94558-94559, 94562, 94567, 94571, 94573-94574, 94576, 94581, 94585, 94589-94592, 94599, 94922-94923, 94926-94928, 94931, 94951-94955, 94972, 94975, 94999

## Region 3

This region includes ZIP codes: 932-933, 935-938, 952-953 and 956-958

<u>The following ZIP codes are excluded:</u> 93512-93515, 93517, 93522, 93526, 93529-93530, 93541-93542, 93545-93546, 93549, 95646, 95724, 95728

## Region 4

 $This\ region\ includes\ ZIP\ codes:\ 92222,\ 92227,\ 92231-92233,\ 92243-92244,\ 92249-92251,\ 92257,\ 92259,\ 92266,\ 92273,\ 92266,\ 92266,\ 92273,\ 92266,\ 92266,\ 92266,\ 92273,\ 922666,\ 922666,\ 922666,\ 922666,\ 922666,\ 922666,\ 922666,\ 922666,\ 922666,\ 922666,\ 922666,\ 922666,\ 9$ 

<sup>&</sup>lt;sup>1</sup> Reimbursement for all dentists will be based on the PPO contracted fee.

<sup>&</sup>lt;sup>2</sup> Oral surgery, Periodontics, and Endodontics are not covered

92275, 92281, 92283, 92328, 92384, 92389, 93013-93014, 93067, 931, 934, 93512-93515, 93517, 93522, 93526,93529-93530, 93541-93542, 93545-93546, 93549, 939, 942, 94503, 94508, 94510, 94512, 94515, 94533-94535, 94558-94559, 94562, 94567, 94571, 94573-94574, 94576, 94581, 94585, 94589-94592, 94599, 94922-94923, 94926-94928,94931, 94951-94955, 94972, 94975, 94999, 95001, 95003-007, 95010, 95012, 95017-019, 95023-024, 95039, 95041, 95043, 95045, 95060-067, 95073, 95075-077, 954-955, 95646, 95724, 95728, 959-961



DDC-2026 rate card (rev. 09/25)