

WOODS
Delta Dental

Effective July 1, 2026

	Delta PPO*
	PPO/Premier
	(no referrals, can go out of network)
Plan Information	
Annual Deductible	\$50 / \$150 (waived for preventive & diagnostic)
Annual Benefit Maximum**	\$1,500 per individual
Lifetime Orthodontia Maximum	\$1,000 per individual
In Network Benefits	
Diagnostic	100%
Preventative	100%
Basic	80%
Major	50%
Orthodontics***	50%
	Biweekly
Total Premiums:	Deduction
Employee Only	\$7.14
Employee & Child(ren)	\$20.73
Employee & Spouse/Domestic Partner	\$16.71
Family	\$37.38

*Benefit basis used as reimbursement for out-of-network services (premier network level)

**Does not apply to preventive and diagnostic services

***Covers up to age 19