Delta Dental PPO™

For groups with 2 to 9 enrolled employees  Plan Year 2018-2019

Rates — Connecticut

Monthly rates valid for effective dates of October 1, 2018 through December 1, 2019. Rate guarantee: One year for groups enrolling on or before December 1, 2019. Rates are guaranteed from the effective date. Monthly rates are based on the location of the group’s headquarters.

<table>
<thead>
<tr>
<th>PPO Plans — 50% to 100% Employer Contribution</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Area 1 — Litchfield, Middlesex, New London, Windham</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Plan</strong></td>
<td><strong>PPO 1</strong></td>
</tr>
<tr>
<td><strong>Deductible/Maximum</strong></td>
<td>A</td>
</tr>
<tr>
<td>Employee Only</td>
<td>$10.31</td>
</tr>
<tr>
<td>Employee &amp; 1 Dependent</td>
<td>$19.79</td>
</tr>
<tr>
<td>Employee &amp; Family</td>
<td>$33.62</td>
</tr>
<tr>
<td><strong>Deductible/Maximum</strong></td>
<td>B</td>
</tr>
<tr>
<td>Employee Only</td>
<td>$12.26</td>
</tr>
<tr>
<td>Employee &amp; 1 Dependent</td>
<td>$23.54</td>
</tr>
<tr>
<td>Employee &amp; Family</td>
<td>$39.99</td>
</tr>
</tbody>
</table>

| **Area 2 — Fairfield, Hartford, New Haven, Tolland** |  |
| **Plan** | **PPO 1** | **PPO 2** | **PPO 3** | **PPO 5** |
| **Deductible/Maximum** | A | A | A | A |
| Employee Only | $11.02 | $25.96 | $42.78 | $44.75 |
| Employee & 1 Dependent | $21.17 | $49.85 | $82.14 | $85.93 |
| Employee & Family | $35.97 | $84.70 | $139.56 | $146.00 |
| **Deductible/Maximum** | B | B | B | B |
| Employee Only | $13.12 | $27.28 | $44.23 | $46.28 |
| Employee & 1 Dependent | $25.18 | $52.37 | $84.92 | $88.85 |
| Employee & Family | $42.79 | $88.98 | $144.28 | $150.97 |

Participation requirements (unless covered elsewhere):
- If employer contributes 100% for employee, all eligible employees must enroll. If employer contributes 100% for dependents, all eligible dependents must enroll.
- 50 -99% (Employer-Paid) — at least 75% of eligible employees or 10 primary enrollees, whichever is greater, must enroll. At least 50% of employees with dependents must enroll their dependents.
Delta Dental PPO Plus Premier™

For groups with 2 to 9 enrolled employees

Rates — Connecticut

Monthly rates valid for effective dates of October 1, 2018 through December 1, 2019. **Rate guarantee:** One year for groups enrolling on or before December 1, 2019. Rates are guaranteed from the effective date. Monthly rates are based on the location of the group's headquarters.

### PPO Plus Premier® Plans - 50% - 100% Employer Contribution

#### Area 1 — Litchfield, Middlesex, New London, Windham

<table>
<thead>
<tr>
<th>Plan</th>
<th>PPO Plus Premier 1 P&amp;D Only</th>
<th>PPO Plus Premier 2</th>
<th>PPO Plus Premier 3</th>
<th>PPO Plus Premier 5</th>
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</thead>
<tbody>
<tr>
<td>Deductible/Maximum</td>
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<td>A</td>
<td>AA</td>
<td>AA</td>
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<tr>
<td>Employee Only</td>
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<td>Employee &amp; 1 Dependent</td>
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<td>Deductible/Maximum</td>
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<td>B</td>
<td>B</td>
<td>AB</td>
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<td>Employee Only</td>
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<td>$159.57</td>
<td></td>
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<tr>
<td>Employee &amp; Family</td>
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#### Area 2 — Fairfield, Hartford, New Haven, Tolland

<table>
<thead>
<tr>
<th>Plan</th>
<th>PPO Plus Premier 1 P&amp;D Only</th>
<th>PPO Plus Premier 2</th>
<th>PPO Plus Premier 3</th>
<th>PPO Plus Premier 5</th>
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</thead>
<tbody>
<tr>
<td>Deductible/Maximum</td>
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<td>A</td>
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<td>Employee Only</td>
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<td>Deductible/Maximum</td>
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<td>B</td>
<td>B</td>
<td>AB</td>
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<td>Deductible/Maximum</td>
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<td>BA</td>
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<tr>
<td>Employee &amp; Family</td>
<td>$170.72</td>
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</tbody>
</table>

### Participation requirements (unless covered elsewhere):

- If employer contributes 100% for employee, all eligible employees must enroll. If employer contributes 100% for dependents, all eligible dependents must enroll.
- 50 - 99% (Employer-Paid) — at least 75% of eligible employees or 10 primary enrollees, whichever is greater, must enroll. At least 50% of employees with dependents must enroll their dependents.
Delta Dental PPO  
For groups with 2 to 9 enrolled employees  
Plan Year 2018-2019

Rates — Connecticut 

Monthly rates valid for effective dates of October 1, 2018 through December 1, 2019. Rate guarantee: One year for groups enrolling on or before December 1, 2019. Rates are guaranteed from the effective date. Monthly rates are based on the location of the group’s headquarters.

PPO Voluntary1 Plans - 0% - 49% Employer Contribution

| Area 1 — Litchfield, Middlesex, New London, Windham |  |
|---|---|---|
| Plan | PPO V1 | PPO V2 |
| Deductible/Maximum | A | A |
| Employee Only | $11.02 | $39.21 |
| Employee & 1 Dependent Employee & Family | $21.15 | $75.28 |
| $35.94 | $127.91 |
| Deductible/Maximum | B |  |
| Employee Only | $13.10 |  |
| Employee & 1 Dependent Employee & Family | $25.15 |  |
| $42.74 |  |

| Area 2 — Fairfield, Hartford, New Haven, Tolland |  |
|---|---|---|
| Plan | PPO V1 | PPO V2 |
| Deductible/Maximum | A | A |
| Employee Only | $11.79 | $41.95 |
| Employee & 1 Dependent Employee & Family | $22.63 | $80.54 |
| $38.45 | $136.84 |
| Deductible/Maximum | B |  |
| Employee Only | $14.02 |  |
| Employee & 1 Dependent Employee & Family | $26.91 |  |
| $45.72 |  |

Participation requirements (unless covered elsewhere):
- If employer contributes 100% for employee, all eligible employees must enroll. If employer contributes 100% for dependents, all eligible dependents must enroll.
- 0–49% (Voluntary) — at least 25% of all eligible employees or two for groups with 2-9 employees, whichever is greater, must enroll.

1 Reimbursement for all dentists is based on the PPO contracted fee.

Deductible/Maximum Key: Single Letter = Maximum, Double Letter = Deductible/Maximum
Delta Dental PPO™

Eligible/ineligible industries¹

<table>
<thead>
<tr>
<th>Eligible industries</th>
<th>SIC code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Agriculture, Forestry, Fishing (except seasonal employees #0761-0783)</td>
<td>0100-0999</td>
</tr>
<tr>
<td>Mining, Oil and Gas Extraction</td>
<td>1000-1499</td>
</tr>
<tr>
<td>Construction Contractors</td>
<td>1500-1799</td>
</tr>
<tr>
<td>Manufacturing</td>
<td>2000-2699</td>
</tr>
<tr>
<td>Printing &amp; Publishing</td>
<td>2700-2799</td>
</tr>
<tr>
<td>Manufacturing (except Jewelry Manufacturing #3911-3915)</td>
<td>2800-3999</td>
</tr>
<tr>
<td>Jewelry Manufacturing</td>
<td>3911-3915</td>
</tr>
<tr>
<td>Transportation</td>
<td>4000-4799</td>
</tr>
<tr>
<td>Communication (Radio, Telephone, TV/Radio Broadcasting)</td>
<td>4800-4899</td>
</tr>
<tr>
<td>Utilities</td>
<td>4900-4999</td>
</tr>
<tr>
<td>Wholesale Trade</td>
<td>5000-5199</td>
</tr>
<tr>
<td>Auto Dealerships</td>
<td>5500-5599</td>
</tr>
<tr>
<td>Restaurants</td>
<td>5800-5899</td>
</tr>
<tr>
<td>Retail</td>
<td>5200-5510, 5610-5699, 5712-5736, 5912-5999</td>
</tr>
<tr>
<td>Finance (Banks, Securities, Credit Agencies)</td>
<td>6000-6299</td>
</tr>
<tr>
<td>Insurance Carriers/Brokers</td>
<td>6300-6499</td>
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<tr>
<td>Real Estate</td>
<td>6500-6799</td>
</tr>
<tr>
<td>Services</td>
<td>7000-7099, 7221, 7291-7299, 7319, 7631</td>
</tr>
<tr>
<td>Beauty &amp; Barber Shops</td>
<td>7231-7241</td>
</tr>
<tr>
<td>Services</td>
<td>7100-7220, 7222-7230, 7242-7290, 7300-7318, 7320-7388, 7390-7630, 7632-7799</td>
</tr>
<tr>
<td>Employment Agencies (Management and Administrative Staff only)</td>
<td>7361-7363</td>
</tr>
<tr>
<td>Amusement, Recreation &amp; Entertainment</td>
<td>7800-7999</td>
</tr>
<tr>
<td>Hospitals</td>
<td>8062-8069</td>
</tr>
<tr>
<td>Medical Labs and Dental Labs</td>
<td>8071, 8072</td>
</tr>
<tr>
<td>Medical Group</td>
<td>8000-8059 &amp; 8082-8099</td>
</tr>
<tr>
<td>Legal</td>
<td>8100-8199</td>
</tr>
<tr>
<td>Private Schools (Elementary &amp; High School)</td>
<td>8200-8299</td>
</tr>
<tr>
<td>Community Service Organizations/Social Services/Government Funded Group</td>
<td>8300-8399</td>
</tr>
<tr>
<td>Museums, Art Galleries &amp; Gardens</td>
<td>8400-8499</td>
</tr>
<tr>
<td>Membership/Organizations/Associations (Management and Administrative Staff only)</td>
<td>8600-8699</td>
</tr>
<tr>
<td>Engineering, Accounting, Research, Management &amp; Related Services</td>
<td>8700-8799</td>
</tr>
<tr>
<td>Public Administration (excluding International Affairs #9721)</td>
<td>9000-9998</td>
</tr>
<tr>
<td>International Affairs</td>
<td>9721</td>
</tr>
<tr>
<td>Management Carve-out (regardless of industry)</td>
<td>9999</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Ineligible industries</th>
<th>SIC code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Seasonal Employees (Farm Labor &amp; Mgt, Landscape and Horticultural services)</td>
<td>0761-0783</td>
</tr>
<tr>
<td>Staff Placed By Employment Agencies</td>
<td>7361-7363</td>
</tr>
<tr>
<td>Misc. Business Services</td>
<td>7389</td>
</tr>
<tr>
<td>Dentist offices</td>
<td>8021</td>
</tr>
<tr>
<td>Public Schools (Elementary &amp; High School)</td>
<td>8200-8299</td>
</tr>
<tr>
<td>Members of Membership Organizations/Associations</td>
<td>8600-8699</td>
</tr>
<tr>
<td>Private Households</td>
<td>8811</td>
</tr>
<tr>
<td>Misc. Services not elsewhere classified</td>
<td>8999</td>
</tr>
<tr>
<td>Public Administration (Cities, Counties, Police, etc.)</td>
<td>9000-9720, 9722-9998</td>
</tr>
<tr>
<td>Seasonal Employees (Christmas/Part-time help)</td>
<td>No SIC</td>
</tr>
<tr>
<td>High Turnover</td>
<td>Varies</td>
</tr>
</tbody>
</table>

¹ SIC rate level cannot change for renewing business.
² Public Sector Groups are an eligible industry with Delta Dental NJ/CT; they are excluded under the Small Business Program.
³ A business has high turnover if 20% or more of the average number of its employees during the past 12 months were newly hired for reasons other than the growth of the business.