



**CEMENT MASONS HEALTH AND WELFARE TRUST FUND
COMPARISON OF DENTAL PLANS
EFFECTIVE JULY 1, 2025**

**COMPARISON OF
BENEFIT PLANS**

Plan Features	Delta Dental of California		UnitedHealthcare Dental	DeltaCare USA
	Delta Dental Premier	Delta Dental PPO		
Type of Plan	Traditional FEE-FOR-SERVICE Plan. Covered dental procedures are paid at allowed amounts. Delta Dental pays a set percentage of an allowed amount determined by the category of service, and you pay the difference.	PPO Plan. Dentists in the Delta Dental PPO plan negotiate fees that are even lower than the Delta Dental Premier plan. Delta Dental pays a set percentage of an allowed amount determined by the category of service, and you pay the difference.	Pre-paid HMO type Plan. No pre-selection is necessary for a UnitedHealthcare dentist who provides all services including referrals to Specialists.	Pre-paid HMO type Plan. You select a PMI dentist who provides all services including referrals to Specialists.
Area Covered	There are thousands of in network Premier dentists available. To find a Premier dentist in your area, visit dental.dentalins.com or call 1-800-765-6003.	There are thousands of in network PPO dentists available. To find a PPO dentist in your area, visit dental.dentalins.com or call 1-800-765-6003.	Dental Offices throughout Northern California. Call 1-800-999-3367 for a UnitedHealthcare dentist in your area.	Dental Offices throughout Northern California. Call 1-800-422-4234 for a DeltaCare USA dentist in your area.
Choice of Dentists	Any dentist, however, you pay less out-of-pocket costs when you use a Delta Dental Premier dentist because fees are pre-negotiated and dentist cannot charge more than the pre-negotiated amount.	Visit a Delta Dental PPO dentist for lower out-of-pocket costs. You are free to use any dentist though you pay lower out-of-pocket costs when you use a Delta Dental Premier dentist and even lower costs when you use a Delta Dental PPO dentist.	UnitedHealthcare participating dentist only. All services and referrals must be provided by a UnitedHealthcare participating dentist. No benefits will be paid if dental services are performed by other than a UnitedHealthcare dentist. Note: You do not need to be assigned to a provider; however, the provider must be a participating dentist under the Direct Compensation plan.	DeltaCare USA dentist only. All services and referrals must be provided by a DeltaCare USA dentist. No benefits will be paid if dental services are performed by other than a DeltaCare USA dentist.
Annual Deductible	\$0 per person, \$0 per family Deductible is waived for diagnostic and preventative services.	\$100 per person, \$300 per family Deductible is waived for diagnostic and preventative services.	None	None
Annual Maximum	\$2,000 per person Diagnostic and preventive services do not count towards annual maximum.	\$2,000 per person Diagnostic and preventive services do not count towards annual maximum	No maximum	No maximum
Out of Pocket Costs	Covered services will be paid at a set percentage. You pay a set coinsurance amount determined by the category of service.	Covered services will be paid at a set percentage. You pay a set coinsurance amount determined by the category of service.	Minimal copays	Minimal copays
Orthodontic Benefits	Covered services will be paid at 50% coinsurance up to a \$1,500 individual lifetime maximum (covered only for the Active Premier division)	Covered services will be paid at 50% coinsurance up to a \$1,000 individual lifetime maximum (covered only for the Active Premier division)	Start up fee of \$350; Retainers \$150, Member's copayment up to \$1,500. Coverage for member, spouse and children starting at age 10.	Start up fee of \$350. Coverage for adults is up to \$1,800 and for children is up to \$1,600.

