



CONTACT INFORMATION

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TDA DHMO (DHMO Dentists)		
In-Network		
Class I Preventative	100% after \$10 copay	
Class II Basic	Based Upon Fee schedule (view it www.bonneville.org)	
Class III Major	Based Upon Fee schedule (view it www.bonneville.org)	
Class IV Orthodontics	15% - 25% Discount	
Annual Maximum	Unlimited	
Specialists	Specialty Care	
Endodontics Periodontics	Based Upon Fee schedule	
Deductible	None	
Waiting Periods	None	None
Employee 2 Party Family	\$12.32 (monthly rate)	\$25.56 (monthly rate) \$38.98 (monthly rate)

TDA ELITE CHOICE (PPO Dentists)		
	In-Network	Out-Of-Network
Class I Preventative	100% after \$15 copay	Based on Fee Schedule
Class II Basic	Based Upon Fee schedule (view it www.bonneville.org)	
Class III Major	Based Upon Fee schedule (view it www.bonneville.org)	
Class IV Orthodontics	15% - 25%	No Coverage
Annual Maximum	\$1,500.00	
Specialists	Same as General Dentist	
Endodontics Periodontics	Based Upon Fee schedule	
Deductible	None	
Waiting Periods	None	None
Employee 2 Party Family	\$26.40 (monthly rate)	\$51.72 (monthly rate) \$84.20 (monthly rate)

TDA PPO / MAC (PPO Dentists)		
	In-Network	Out-Of-Network
Class I Preventative	100%	90% MAC
Class II Basic	80%	70% MAC
Class III Major	50%	40% MAC
Class IV Orthodontics	50%	50% MAC
Annual Maximum	\$1,200.00	
Ortho Lifetime Maximum	\$1,000.00 Up to Age 19	
Endodontics Periodontics	Class III	
Deductible	\$50 PP / \$150 Family	
Waiting Periods	12 Months. Waived if transferring EMI Health or other TDA plan	
Employee 2 Party Family	\$31.42 (monthly rate)	\$65.05 (monthly rate) \$105.77 (monthly rate)

TDA COMPANION (PPO Dentists)		
	In-Network	Out-Of-Network
Class I Preventative	100%	100% MPR
Class II Basic	80%	80% MPR
Class III Major	50%	50% MPR
Class IV Orthodontics	50%	50% MPR
Annual Maximum	\$1,000.00	
Ortho Lifetime Maximum	\$1,000.00 Up to Age 19	
Endodontics Periodontics	Class III	
Deductible	\$100.00 Lifetime	
Waiting Periods	12 Months. Waived if transferring EMI Health or other TDA plan	
Employee 2 Party Family	\$37.99 (monthly rate)	\$78.67 (monthly rate) \$127.91 (monthly rate)

2012 COPAY FEE EXAMPLES		
2331	Porcelain filling 2 surface anterior	\$50
2394	Porcelain filling 4 surface posterior	\$105
7240	Complete boney impaction	\$115
4210	Gingivectomy (periodontics)	\$200
3330	Molar Root Canal	\$365
2750	Porcelain Crown lab fee	\$275
9430	Office Visit	\$10

2012 COPAY FEE EXAMPLES In-Network		
2331	Porcelain filling 2 surface anterior	\$40
2394	Porcelain filling 4 surface posterior	\$95
7240	Complete boney impaction	\$125
4210	Gingivectomy (periodontics)	\$250
3330	Molar Canal	\$323
2750	Porcelain Crown	\$365
9430	Office Visit	\$15

2012 COPAY FEE EXAMPLES		
2331	Porcelain filling 2 surface anterior	Class II
2394	Porcelain filling 4 surface posterior	Class II
7240	Complete boney impaction	Class II
4210	Gingivectomy (periodontics)	Class III
3330	Molar Canal	Class III
2750	Porcelain Crown	Class III
9430	Office Visit	Class I

2012 COPAY FEE EXAMPLES		
2331	Porcelain filling 2 surface anterior	Class II
2394	Porcelain filling 4 surface posterior	Class II
7240	Complete boney impaction	Class III
4210	Gingivectomy (periodontics)	Class III
3330	Molar Root Canal	Class III
2750	Porcelain Crown	Class III
9430	Office Visit	Class I