Fidelio Dental Insurance

Dental Plan Options

Fidelio 360 Plus vs. Fidelio DPPO

Group: UFCW Local 360

	Fidelio 360 Plus	Fidelio DPPO
Network	Limited provider network: care must be received in-network.	Includes both in-network and out-of-network options, offering more provider flexibility.
Out-of-Pocket Costs	No out-of-pocket costs for covered services within the network.	Deductibles and co-insurance apply.
Deductibles	None	$50 individual / $150 family (waived for preventive and diagnostic services).
Annual Maximum	No annual maximum	$1,000 in-network; $500 out-of-network.
Coverage for Preventive Care	No out-of-pocket costs for covered services. See Patient Schedule.	90% for preventive and diagnostic services both in-network and out-of-network.
Basic Services (e.g., fillings)	No out-of-pocket costs for covered services. See Patient Schedule.	70% coverage in-network and out-of-network.
Major Services (e.g., crowns)	No out-of-pocket costs for covered services. See Patient Schedule.	50% coverage in-network and out-of-network.
Orthodontics	No out-of-pocket costs for covered services. See Patient Schedule.	50% coverage for dependent children up to age 19 (lifetime max: $1,000).
Waiting Periods	None	None
Out-of-Network Benefits	No coverage for out-of-network care.	Reduced benefits: payable at the Maximum Allowable Charge (MAC).
PRE-DETERMINATION REQUIREMENT	**REQUIRED FOR DENTAL WORK OVER $300:** Patient is responsible to ensure Pre-determination is submitted.	Not specifically required.
Special Notes	Coverage limited to procedures on the "Patient Schedule" and thus Frequency and limitations may apply.	Frequency and service limitations may apply.

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