

## UC SHIP Dental and Vision Insurance Plans Quick Reference

**Information subject to change—please verify eligibility prior to visit**

- **NO Referral is needed**
- See any DELTA Dental PPO Provider, even outside of Santa Cruz County  
<https://www.deltadentalins.com/ucship/>
- See any Anthem Blue View Vision Provider, even outside of Santa Cruz County  
<https://www.anthem.com/find-care/>

### Quick Reference for UC SHIP Dental Coverage—Delta Dental Customer Service 1-800-765-6003

Accepted by ONSITE Dental on Campus\*

#### Delta Dental PPO Plan

- **\$25 Deductible for work** (no deductible for preventive services 2X per year)
- **\$1,000 MAXIMUM PER YEAR**
- **COVERS** (in network):
  - Exams, Cleanings, X-Rays, Fluoride 100%
  - **BASIC SERVICES** at 80% include:  
Fillings, Endodontics (root canal), Periodontics & Oral Surgery and Night Guard
  - **MAJOR SERVICES AT 70%** include:  
Prosthodontics, Crowns & Cast Restorations, Inlays/Onlays or Implants
- **NOT COVERED:**  
*Orthodontics and Prosthetics*

#### Some Local Providers—subject to change

\***ONSITE Dental at UCSC**— Schedule online at:  
[www.onsitedental.com](http://www.onsitedental.com)

**Santa Cruz Dental**—100 Pioneer St. Ste D, SC 831-423-9436  
**Santa Cruz Pacific Dental**--550 Water St. Ste. J2, SC 831-458-3384  
**Joseph Kim, DDS** -1016 Soquel Ave. Ste A, SC 831-423-2447  
**Felton Dental Center**—6230 Gushee St., Felton 831-335-5324  
**Cynthia Creech DDS**—231 Main St., BL 831-336-2261  
Oral Surgery  
**Corrine Cline-Fortunato DDS**  
 223 Mount Hermon Rd., #B SV 831-430-9910  
**Erick Eklund DDS**  
 541 Frederick St, SC 831-426-5050  
**Santa Cruz Oral and Maxillofacial Surgery**  
 1663 Dominican Way, Ste. 112, SC 831-475-0221  
**Jeffrey Smith DDS**--550 Water St. Ste. I-2, SC 831-426-6135

### Quick Reference for UC SHIP Vision Coverage—Anthem Blue View Vision Insight 1-866-940-8306

[www.anthem.com/ca](http://www.anthem.com/ca) Accepted by UCSC Student Health Center Optometry on campus\*

**In Network Providers:**  
**\$10 Co-pay for Routine Eye Exam**  
**Eyeglass Frames up to \$120 then 20% off remainder**  
**Eyeglass Lenses \$25 co-pay**

**Contact Lenses—Disposable – Up to \$120** (in lieu of glasses)  
**\*\*Contact Lens evaluation and fitting has additional charges due to level of complexity and type of contacts with charges ranging from \$32-300\*\***

#### Some Local Covered Providers—subject to change

\***UCSC Optometry at Student Health Center**  
**831-459-2500**

**Santa Cruz Optometric Center**  
 904 Cedar St., Santa Cruz 831-426-1050

**Eye Q Optometry, Ste E**—1101 Pacific Ave., Santa Cruz  
 831-466-3937

**Curtis Froid OD**—1015 Mission St., Santa Cruz  
 831-423-5844

**LensCrafters**—1855 41<sup>st</sup> Ave., G11, Capitola 831-475-6396

**Insight Eye Care-2 locations:**  
 2121 41<sup>st</sup> Ave. Suite 108, Capitola  
 831-476-7744

255 Mount Hermon Rd, #D, Scotts Valley  
 831-438-5526

**Hunt and Shaw OD's**—7965 Hwy 9, Ben Lomond  
 831-336-2279

**For more info:** Student Health Center Insurance Office <https://healthcenter.ucsc.edu/billing-insurance/index.html>  
<https://www.ucop.edu/ucship/>

Covered Providers subject to change based on contracting with Delta Dental PPO or Anthem Blue View Vision Insight