

DELTA DENTAL PPOSM

Pediatric Basic Plan
for Small Businesses

A healthy mouth starts here.
Get covered. Save money. Smile bright.



Why choose this plan?

- Checkups, cleanings and x-rays covered
- Large network for maximum savings
- Visit any licensed dentist
- No ID card needed
- Easy claims
- Find plan information, claims, dentists and ID cards using a smartphone or PC

SMILE HEALTHY

Get the coverage enrollees need and access to the largest number of network dentists nationally with Delta Dental PPO.^{1, 2} Our easy-to-use plan helps keep smiles healthy. Learn more and purchase today!

GO PPO!

A Delta Dental PPO plan gives enrollees access to a network of dentists who've agreed to keep costs low. And since four out of five dentists nationally are participating dentists, enrollees may already be visiting a network dentist.

Delta Dental PPO covers checkups, cleanings and x-rays to help keep smiles bright. It covers lots of other great services, too. After enrollees satisfy the plan's deductible, they'll be responsible for a coinsurance percentage, which is their share of the charges — Delta Dental pays the rest.³

Delta Dental of New York, Inc.

One Delta Drive
Mechanicsburg, PA 17055

Customer Service

800-471-0275

Claims Address

One Delta Drive
Mechanicsburg, PA 17055

deltadentalins.com





Dental is important...

Give employees peace of mind with a Delta Dental PPO plan. The right coverage can help them protect their smiles and their wallets.

More ways to save

Visit a Delta Dental PPO dentist.

Enrollees usually pay less when they visit a PPO network dentist. Enrollees can go to the Find a Dentist tool on our home page to search for a PPO dentist. (We offer results by mobile device location too!) Our large network makes it easy to find a convenient participating dentist.

For additional choice, our Delta Dental Premier® dentists offer enrollees another way to save. These dentists are not “in-network,” but enrollees will usually pay less than if they visit a non-Delta Dental dentist.

Easy to use

No ID card needed.

Enrollees can simply provide the dental office their name, date of birth and social security or enrollee identification number. No ID card is required. Or they can log in on their smartphone or mobile device and display their mobile ID card.

Claims are a breeze.

Enrollees pay only their portion of the bill for services when they visit a Delta Dental dentist; we take care of the rest. After a claim is processed, we provide enrollees a statement that explains the services provided and their share of the cost. Increase the convenience by signing up for paperless statements.

Quick and easy online information

Enrollees can manage their accounts online wherever they are — work, home or on the go. Our tools help enrollees access plan information, view claims, find dentists and display ID cards.

Support healthy habits

Access to the SmileWay® Wellness Program

Check out our great oral health resources! They can help your employees stay informed and stay healthy. SmileWay offers risk assessment quizzes, articles, videos, fun stuff for kids and a subscription to *Grin!*, our free dental wellness e-magazine.

Coverage for peace of mind

Skipping preventive care can lead to more expensive treatment that could easily cost more than a full year's premium (and could contribute to lost time at work). A Delta Dental PPO plan can help your employees and their families stay healthy and avoid more costly care.

¹ In Texas, Delta Dental Insurance Company underwrites a Dental Provider Organization (DPO) plan.

² NetMinder Dental Network Trend Report, March 2016. Based on total unique dentists nationwide.

³ Enrollees are responsible for amounts for non-covered services. For adult benefits, once the plan maximum is reached, all charges are the responsibility of the patient.

This benefit information is only a summary and not intended or designed to replace or serve as the plan's Group Contract. Please consult the Evidence of Coverage for a complete description of plan benefits, limitations and exclusions. In the event of any inconsistency between this document and the Evidence of Coverage, the terms of the Evidence of Coverage will prevail.

Delta Dental is a registered mark of Delta Dental Plans Association.

SECTION XVII

Delta Dental PPO Pediatric Basic Plan

SCHEDULE OF BENEFITS

| COST-SHARING | Participating Provider Member Responsibility for Cost-Sharing | Non-Participating Provider Member Responsibility for Cost-Sharing | |
|--|--|--|---|
| PEDIATRIC DENTAL CARE ESSENTIAL HEALTH BENEFIT | | | |
| Deductible <ul style="list-style-type: none"> One (1) Member under Age 19 Two (2) or More Members under Age 19 Out-of-Pocket Limit <ul style="list-style-type: none"> One (1) Member under Age 19 Two or More Members under Age 19 | \$65 each Plan Year \$195 each Plan Year \$400 each plan Year \$800 each Plan Year | \$65 each Plan Year \$195 each Plan Year Not Applicable Not Applicable | The Deductible is a combined In-Network and Out-of-Network Deductible |
| PEDIATRIC DENTAL ESSENTIAL HEALTH BENEFIT & CARE | Participating Provider Member Responsibility for Cost-Sharing | Non-Participating Provider Member Responsibility for Cost-Sharing | Limits |
| Pediatric Dental Care <ul style="list-style-type: none"> Preventive Dental Care Routine Dental Care Endodontics | 0% Coinsurance after Deductible 0%-50% Coinsurance after Deductible 50% Coinsurance after Deductible | 0% Coinsurance after Deductible 0%-50% Coinsurance after Deductible 50% Coinsurance after Deductible | Two (2) Cleanings per Plan Year Two (2) Dental Exams per Plan Year Full mouth X-rays or panoramic X-rays at 36 month intervals and bitewing X-rays at 6 to 12 month intervals |

| | | | |
|---|--|--|--|
| <ul style="list-style-type: none"> • Periodontics • Prosthodontics • Orthodontics <p>Orthodontics require Preauthorization</p> | 50% Coinsurance after Deductible 50% Coinsurance after Deductible 50% Coinsurance after Deductible | 50% Coinsurance after Deductible 50% Coinsurance after Deductible 50% Coinsurance after Deductible | |
| ADDITIONAL PEDIATRIC DENTAL CARE | Participating Provider Member Responsibility for Cost-Sharing | Non-Participating Provider Member Responsibility for Cost-Sharing | Limits |
| <ul style="list-style-type: none"> • Dental examinations and consultations • X-rays, full mouth x-rays or panoramic x-rays • Visits; Simple extractions and other routine dental surgery not requiring hospitalization; In-office conscious sedation; Amalgam, composite restorations and stainless steel crowns; Other restorative materials • Temporomandibular Joint (TMJ) Dysfunction | 0% Coinsurance after Deductible 0% Coinsurance after Deductible 50% Coinsurance after Deductible 50% Coinsurance after Deductible | 0% Coinsurance after Deductible 0% Coinsurance after Deductible 50% Coinsurance after Deductible 50% Coinsurance after Deductible | Two (2) Dental Exams per Plan Year Full mouth X-rays or panoramic X-rays at 36 month intervals and bitewing X-rays at 6 to 12 |

All in-network Preauthorization requests are the responsibility of Your Participating Provider. You will not be penalized for a Participating Provider's failure to obtain a required Preauthorization. However, if services are not covered under the Contract, You will be responsible for the full cost of the services.