Your Smile, Your Choice
Delta Dental PPO℠ & DeltaCare® USA

Your company lets you choose between two dental plans from Delta Dental. Either way, you’ll get reliable dentist networks and affordable preventive care. Your options are:

**Delta Dental PPO**¹
This preferred provider plan offers the convenience and flexibility of visiting any licensed dentist, anywhere. Covered services are paid based on a percentage — if, for example, fillings are covered at 80%, you pay the remaining 20%. Get the most plan value by choosing a Delta Dental PPO dentist. PPO network dentists complete claim forms for you and can help advise you on questions regarding your share of the payment.

**DeltaCare USA**
Under this HMO-type plan, you’ll have your choice of skilled primary care dentists from the DeltaCare USA network. Select a primary care dentist, who will then coordinate any needed referrals to a specialist.² Covered services provided by your DeltaCare USA dentist have preset copayments (dollar amounts), which are listed in your plan booklet. There are no maximums or deductibles.³

¹ In Texas, Delta Dental Insurance Company offers a Dental Provider Organization (DPO) plan.
² In WY, you do not need to select a primary care dentist, but you must visit a network dentist to receive benefits. In the following states, you can maximize your savings when you visit a network dentist, although you may visit any licensed dentist and receive out-of-network coverage: AK, CT, LA, ME, MS, MT, NC, ND, NH, OK, SD, VT. Refer to your plan booklet for details about your out-of-network benefits.
³ Refer to your plan booklet for more information about covered services, deductibles and maximums.
Can I go to any dentist? | You can visit any licensed dentist to receive coverage, but you’ll save the most at an in-network dentist. | You must select a DeltaCare USA primary care dentist and visit this dentist to receive benefits.2

What procedures are covered? | Your plan covers a wide range of services, with no exclusions for most pre-existing conditions. Preventive care, like routine cleanings and exams, is offered at low or no cost. | Your plan covers over 300 procedures, with no exclusions for most pre-existing conditions. Preventive care, like routine cleanings and exams, has low or no copayments.

Are there deductibles and maximums? | Yes, most plans have an annual deductible and maximum. | No, there are no annual deductibles or maximums.4

Am I covered for treatment I began under a different employer-sponsored dental plan? | Coverage is provided only for treatment started and completed after your effective date. Orthodontic treatment may be an exception to this rule. | Coverage is provided only for treatment started and completed after your effective date. Orthodontic treatment may be an exception to this rule.

What if I started orthodontic treatment under my previous dental plan? | Typically, Delta Dental pays the remaining benefit not paid by your prior dental plan. | You are responsible for the copayments and fees subject to the provisions of your prior dental plan.

What happens if I need to see a specialist? | You do not need a referral from your dentist. | Contact your DeltaCare USA primary care dentist to coordinate your referral.6

What is my out-of-area coverage? | You can visit any licensed dentist. | You have a limited benefit to go out of network for emergency care.

How do I change my dentist? | You can change your dentist at any time without contacting Delta Dental. | You can change your selected or assigned primary care dentist online or by telephone.7

Do I need to fill out claims? | If you visit a Delta Dental dentist, the dental office will file the claim for you. If you go to a non-Delta Dental dentist, you may have to submit the claim yourself. | There are generally no claim forms under your plan.8

4 In AK, CT, ND and SD, you have an out-of-network calendar year maximum of $500 when you visit an out-of-network dentist.
5 Except in Texas; please refer to your plan booklet for details.
6 Most services not performed by your primary care dentist must be authorized by Delta Dental. In some states, specialty care benefits are only available for services performed by an in-network specialist. Refer to your plan booklet for details.
7 In the following states, you can change your dentist any time without contacting Delta Dental: AK, CT, LA, ME, MS, MT, NC, ND, NH, OK, SD, VT, WY.
8 You may have to complete a claim form if you visit an out-of-network dentist, such as for limited emergency treatment or in the following states: AK, CT, LA, ME, MS, MT, NC, ND, NH, OK, SD, VT.

**PRODUCT ADMINISTRATION**

DeltaCare USA is underwritten in these states by these entities: AL — Alpha Dental of Alabama, Inc.; AZ — Alpha Dental of Arizona, Inc.; CA — Delta Dental of California; AR, CO, IA, MA, ME, MI, MN, NC, ND, NE, NH, OK, OR, RI, SC, SD, VT, WA, WI, WY — Dentegra Insurance Company; AK, CT, DC, DE, FL, GA, KS, LA, MS, MT, TN, WV — Delta Dental Insurance Company; HI, ID, IL, IN, KY, MD, MO, NJ, OH, TX — Alpha Dental Programs, Inc.; NV — Alpha Dental of Nevada, Inc.; UT — Alpha Dental of Utah, Inc.; NM — Alpha Dental of New Mexico, Inc.; NY — Delta Dental of New York, Inc.; PA — Delta Dental of Pennsylvania; VA — Delta Dental of Virginia. Delta Dental Insurance Company acts as the DeltaCare USA administrator in all these states. These companies are financially responsible for their own products.