



THE
TEXAS A&M
UNIVERSITY
SYSTEM

Dental Benefits Overview
2025



Your plan options:

Delta Dental PPO™

DPO in Texas

DeltaCare® USA

Key Insights: Compare your options

PPO

- Visit any licensed dentist, but save money by staying in network
- Pay coinsurance amount (%) not covered by the plan
- Deductibles and maximums may apply

DeltaCare USA

- Choose your selected primary care dentist from the DeltaCare USA network
- Pay set copayment (\$) for the procedure direct to your primary dentist
- No deductibles or annual maximums



PPO option

Overview

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For full coverage details,
see your Employee Booklet

Your benefit highlight summary can be found
on your dedicated Delta Dental site:

<https://www.deltadentalins.com/tamus/>

Benefit Highlights: Delta Dental PPO TM

Plan Benefit Highlights for: Texas A&M University System

Group No: 04170

| | | | | |
|---|---|------------------------|------------------------|----------------------|
| Eligibility | For eligibility details, refer to the plan's Evidence/Certificate of Coverage (on file with your benefits administrator, plan sponsor or employer). | | | |
| Deductibles | \$75 per person / \$225 per family each plan year | | | |
| Deductibles waived for Diagnostic & Preventive (D & P)? | Yes | | | |
| Maximums | \$1,500 per person each plan year | | | |
| D & P counts toward maximum? | No | | | |
| Waiting Period(s) | Basic Services None | Major Services None | Prosthodontics None | Orthodontics None |

| Benefits and Covered Services* | Delta Dental PPO dentists** | Non-Delta Dental PPO dentists** |
|--|-----------------------------|---------------------------------|
| Diagnostic & Preventive Services (D & P) Exams, cleanings, x-rays and sealants | 100% | 100% |
| Basic Services Fillings and posterior composites | 80% | 80% |
| Endodontics (root canals) Covered Under Basic Services | 80% | 80% |
| Periodontics (gum treatment) Covered Under Basic Services | 80% | 80% |
| Oral Surgery Covered Under Basic Services | 80% | 80% |
| Night Guard Benefits | 80% | 80% |
| Major Services Crowns, onlays and cast restorations | 50% | 50% |
| Prosthodontics Bridges, dentures and implants | 50% | 50% |
| Orthodontic Benefits Adults and dependent children | 50% | 50% |
| Orthodontic Maximums | \$1,500 Lifetime | \$1,500 Lifetime |

Maximums and deductibles

- An **annual maximum** is the total your plan pays for covered services each year
- A **deductible** is the amount you pay out of pocket before your plan begins to cover services
- A **lifetime orthodontic maximum** is the total your plan pays for orthodontic treatment

Delta Dental PPO

Deductible
per plan year

\$75 per person
\$225 per family

Waived for Diagnostic & Preventive services

Annual maximum
per plan year

\$1,500 per person
Diagnostic & Preventive services
waived from annual max

Orthodontic
*Lifetime maximum

\$1,500 per person
*Lifetime = 1 x use only
Adult and dependent children

Your PPO coverage

What's covered: Diagnostic and Preventive care



Delta Dental PPO

Dental exam
(3x per plan year)

Plan pays 100%

Cleaning
(3x per plan year)

Plan pays 100%

Sealants
(under age 16)

Plan pays 100%

Your PPO coverage

What's covered: Basic services



Delta Dental PPO

Your plan pays

Amalgam (silver) filling, back tooth

Plan pays 80%

Resin (white) filling, front tooth

Plan pays 80%

Root canal, back tooth

Plan pays 80%

Oral surgery

Plan pays 80%

Night Guard

Plan pays 80%

Your PPO coverage

What's covered: Major services and prosthodontics

Delta Dental PPO

Your plan pays

Crowns

Plan pays 50%

Complete upper denture

Plan pays 50%

Complete lower denture

Plan pays 50%

Bridge

Plan pays 50%

Dental implant

Plan pays 50%



Your PPO coverage

What's covered: Orthodontics

Delta Dental PPO

Your plan pays

Comprehensive orthodontics
(child)

Plan pays 50%

Comprehensive orthodontics
(adult)

Plan pays 50%



PPO Plan covers orthodontics for adults and dependent children with a lifetime max (LTM) of \$1,500
The lifetime maximum is the maximum dollar amount your plan will pay toward orthodontic care.

Pre-treatment estimate

It's easy to plan for dental expenses

1

Ask your dentist for an estimate



2

Dentist sends details to Delta Dental



3

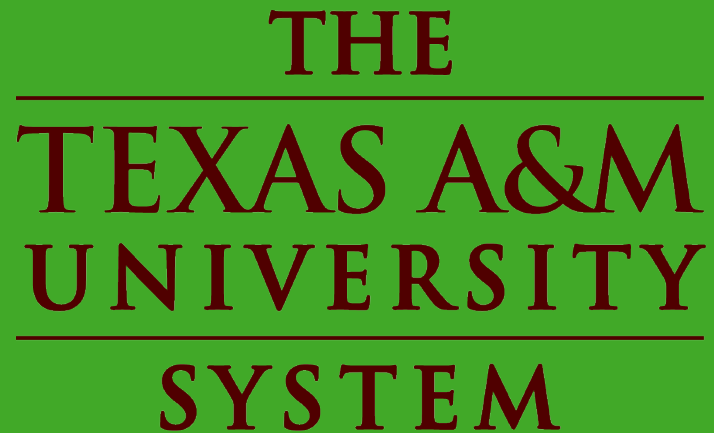
You and your dentist receive a cost estimate





DeltaCare USA option

Overview



Only for TAMUS residents living in:

California, Colorado, District of Columbia, Florida, Georgia, Maryland, Minnesota, New York, Tennessee, Texas, Utah



For a full description of benefits and copayments, refer to your DeltaCare USA fee schedule.

Benefit Highlights:

- Set copays
- No annual maximums
- No deductibles
- No claims
- Low premiums

Information also available:

<https://www.deltadentalins.com/tamus/>

| Plan TX15B | DeltaCare USA | Description of Benefits and Copayments |
|--|--|--|
| D3000-D3999 IV. ENDODONTICS | | |
| D3110 | Pulp cap - direct (excluding final restoration) | \$5.00 |
| D3120 | Pulp cap - indirect (excluding final restoration) | \$5.00 |
| D3220 | Therapeutic pulpotomy (excluding final restoration) - removal of pulp coronal to the dentinocemental junction and application of medicament | \$45.00 |
| D3221 | Pulpal debridement, primary and permanent teeth | \$50.00 |
| D3222 | Partial pulpotomy for apexogenesis - permanent tooth with incomplete root development | \$45.00 |
| D3230 | Pulpal therapy (resorbable filling) - anterior, primary tooth (excluding final restoration) | \$60.00 |
| D3240 | Pulpal therapy (resorbable filling) - posterior, primary tooth (excluding final restoration) | \$60.00 |
| D3310 | Root canal - endodontic therapy, anterior tooth (excluding final restoration) | \$125.00 |
| D3320 | Root canal - endodontic therapy, premolar tooth (excluding final restoration) | \$215.00 |
| D3330 | Root canal - endodontic therapy, molar tooth (excluding final restoration) | \$365.00 |
| D3331 | Treatment of root canal obstruction; non-surgical access | \$80.00 |
| D3332 | Incomplete endodontic therapy; inoperable, unrestorable or fractured tooth | \$80.00 |
| D3333 | Internal root repair of perforation defects | \$80.00 |
| D3346 | Retreatment of previous root canal therapy - anterior | \$155.00 |
| D3347 | Retreatment of previous root canal therapy - premolar | \$245.00 |
| D3348 | Retreatment of previous root canal therapy - molar | \$395.00 |
| D3351 | Apexification/recalcification - initial visit (apical closure/calific repair of perforations, root resorption, etc.) | \$80.00 |
| D3352 | Apexification/recalcification - interim medication replacement (apical closure/calific repair of perforations, root resorption, pulp space disinfection, etc.) | \$55.00 |
| D3353 | Apexification/recalcification - final visit (includes completed root canal therapy - apical closure/ calcific repair of perforations, root resorption, etc.) | \$55.00 |
| D3410 | Apicoectomy - anterior | \$155.00 |
| D3421 | Apicoectomy - premolar (first root) | \$165.00 |
| D3425 | Apicoectomy - molar (first root) | \$175.00 |
| D3426 | Apicoectomy (each additional root) | \$100.00 |
| D3430 | Retrograde filling - per root | \$75.00 |
| D3450 | Root amputation - per root | \$85.00 |
| D3471 | Surgical repair of root resorption - anterior | \$155.00 |
| D3472 | Surgical repair of root resorption - premolar | \$155.00 |
| D3473 | Surgical repair of root resorption - molar | \$155.00 |
| D3501 | Surgical exposure of root surface without apicoectomy or repair of root resorption - anterior | \$155.00 |
| D3502 | Surgical exposure of root surface without apicoectomy or repair of root resorption - premolar | \$155.00 |
| D3503 | Surgical exposure of root surface without apicoectomy or repair of root resorption - molar | \$155.00 |
| D3920 | Hemisection (including any root removal), not including root canal therapy | \$75.00 |
| D4000-D4999 V. PERIODONTICS | | |
| <i>- Includes preoperative and postoperative evaluations and treatment under a local anesthetic.</i> | | |
| D4210 | Gingivectomy or gingivoplasty - four or more contiguous teeth or tooth bounded spaces per quadrant | \$160.00 |
| D4211 | Gingivectomy or gingivoplasty - one to three contiguous teeth or tooth bounded spaces per quadrant | \$95.00 |
| D4212 | Gingivectomy or gingivoplasty to allow access for restorative procedure, per tooth | \$95.00 |
| D4240 | Gingival flap procedure, including root planing - four or more contiguous teeth or tooth bounded spaces per quadrant | \$160.00 |
| D4241 | Gingival flap procedure, including root planing - one to three contiguous teeth or tooth bounded spaces per quadrant | \$95.00 |
| D4245 | Apically positioned flap | \$175.00 |
| D4249 | Clinical crown lengthening - hard tissue | \$150.00 |
| D4260 | Osseous surgery (including elevation of a full thickness flap and closure) - four or more contiguous teeth or tooth bounded spaces per quadrant | \$385.00 |
| D4261 | Osseous surgery (including elevation of a full thickness flap and closure) - one to three contiguous teeth or tooth bounded spaces per quadrant | \$308.00 |
| D4263 | Bone replacement graft - retained natural tooth - first site in quadrant | \$235.00 |
| D4264 | Bone replacement graft - retained natural tooth - each additional site in quadrant | \$85.00 |
| S-A-TX-STD-R20 | | TX15B - V21 |

How DeltaCare USA – Dental HMO Plan works

Getting dental care is easy

1



Choose a primary care dentist online or by phone

Make an appointment



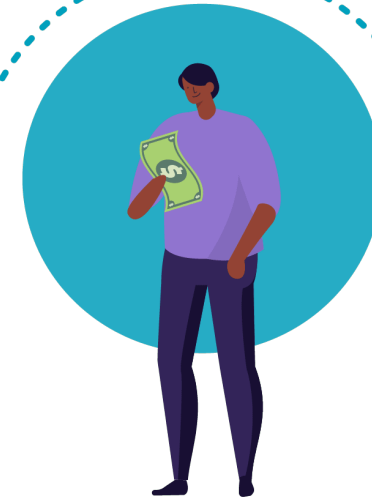
2

3



Visit the dentist

Pay your copayment (if any)



4

What's covered



Your DeltaCare USA plan

Deductibles and maximums

None

Diagnostic and preventive services

Cleanings \$5

Exams \$0

Bitewing x-rays \$0

What's covered

Your DeltaCare USA – Dental HMO plan

Basic services

| | |
|---|-------|
| Amalgam fillings (one surface) | \$8 |
| Root canals (Anterior, excluding final restoration) | \$125 |
| Scaling and root planning (per quadrant, limited to 4 per 12 consecutive months) | \$60 |

Major services

| | |
|-------------------------------------|-------|
| Crown (porcelain/ceramic substrate) | \$395 |
| Complete Denture (maxillary) | \$365 |



What's covered for Ortho

Your DeltaCare USA – Dental HMO plan



Comprehensive orthodontic treatment

Children

(Child or adolescent to age 19)

\$1,900 copayment plus pre- and post-treatments costs

Adults

(including dependent adult children covered to age 26)

\$2,100 copayment plus pre- and post-treatments costs

Specialty and emergency care

DeltaCare USA

- If you need specialty care, your general dentist will refer you to an in-network specialist
- Your plan includes out-of-network coverage only for emergency services required during non-business hours or while traveling away from your assigned dental facility.





Member support



Positive customer service experience

- Predictive technology streamlines experience
- Information in real time (24/7 IVR)
- 100% of calls are recorded
- Call-back feature

PPO Plan: 800-521-2651

- Monday through Friday, 7 am – 7 pm CST
- Automated telephone system: 24/7

DeltaCare USA: 800-422-4234

- Monday through Friday, 7 am – 8 pm CST
- Automated telephone system: 24/7

*IVR = Interactive Voice Response



Go mobile

Download the app to have all the information you need at your fingertips



What can you do with the app?

Find a dentist

Electronic ID card

Coverage details

Cost estimator

To find the app, visit the App Store or Google Play and search for “Delta Dental.” Then download the **Delta Dental** app by Delta Dental Plans Association.

Sign up for an online account

Check your benefits information online



- Check your plan details: eligibility, covered services and level of benefits.
- Look up claim statements for recent dental visits.
- View or print your ID card.
- Estimate the cost of your next procedure.
- Submit questions to Customer Service.

Visit your dedicated TAMUS website with Delta Dental

<https://www.deltadentalins.com/tamus/>

The screenshot shows the Delta Dental TAMUS website. At the top left is the Delta Dental logo. At the top right are dropdown menus for "Delta Dental PPO™" and "DeltaCare™ USA". The main header area is green and contains the text "Welcome Texas A&M University System" on the left and "THE TEXAS A&M UNIVERSITY SYSTEM" on the right. Below the welcome text is a green button that says "Sign in / register".

The main content area is divided into two columns. The left column features a "Find a dentist" section. It includes a sub-header "Find a dentist", a sub-text "Looking for a dentist? Find the one that's right for you.", a "Location*" input field with the placeholder "Enter address, city or ZIP code", a "Network*" dropdown menu with the placeholder "Select a network", and a green "Find a dentist" button. Below this is a "Please note" section: "Please note: Clicking the Find a dentist button will take you to the main Delta Dental website, [deltadentalins.com](https://www.deltadentalins.com). You may find information on our main site that is not specific to your plan and benefits."

The right column features a photograph of a male dentist in a white coat and a female dental assistant in blue scrubs looking at a tablet together. Below the photo is a section titled "Get started with your Delta Dental plan". It includes a sub-text: "Get the most value from our online resources by creating a secure online account. [Register now](#) to review the specific details of your plan." Below this is a bulleted list of steps: "• Find a network dentist near you", "• Select your network dentist (DeltaCare™ USA employees only)", "• Check your PPO or DeltaCare USA benefits and eligibility", "• View or print your ID card (Please note: An ID card is not needed to receive services.)", and "• Go paperless by signing up to receive email notifications when a dental benefit statement is available online and discontinue your mailed statements. (Delta Dental PPO™ and Delta Dental Premier® employees only)". At the bottom of this section is a green "Register" button.



Member perks



LifePerks program features



- Access to thousands of discounts
- Save on childcare, financial, auto and travel services
- Discounts on fitness gear and gym memberships
- Entertainment discounts on movies and theme parks
- Discounts on oral care products to maintain your oral health
- Local and nationwide offers from brands you know and love

Visit LifePerksML.lifemart.com to learn more and register.

Savings you can hear and see

Discounts on hearing aids and LASIK eye surgery



- Discounts on hearing aids and one year of free follow-up care
- 66% average savings off retail hearing aid pricing
- Call Amplifon at **888-779-1429**
- [amplifonusa.com/deltadentalins](https://www.amplifonusa.com/deltadentalins)



- Discount on LASIK eye surgery, including pre- and post-operative visits
- 35% off national average price
- Call QualSight at **855-284-2020**
- [qualsight.com/-delta-dental](https://www.qualsight.com/-delta-dental)

BrushSmart™

A free oral wellness program exclusively for Delta Dental members



Members that sign up receive:



Immediate
access to
special offers



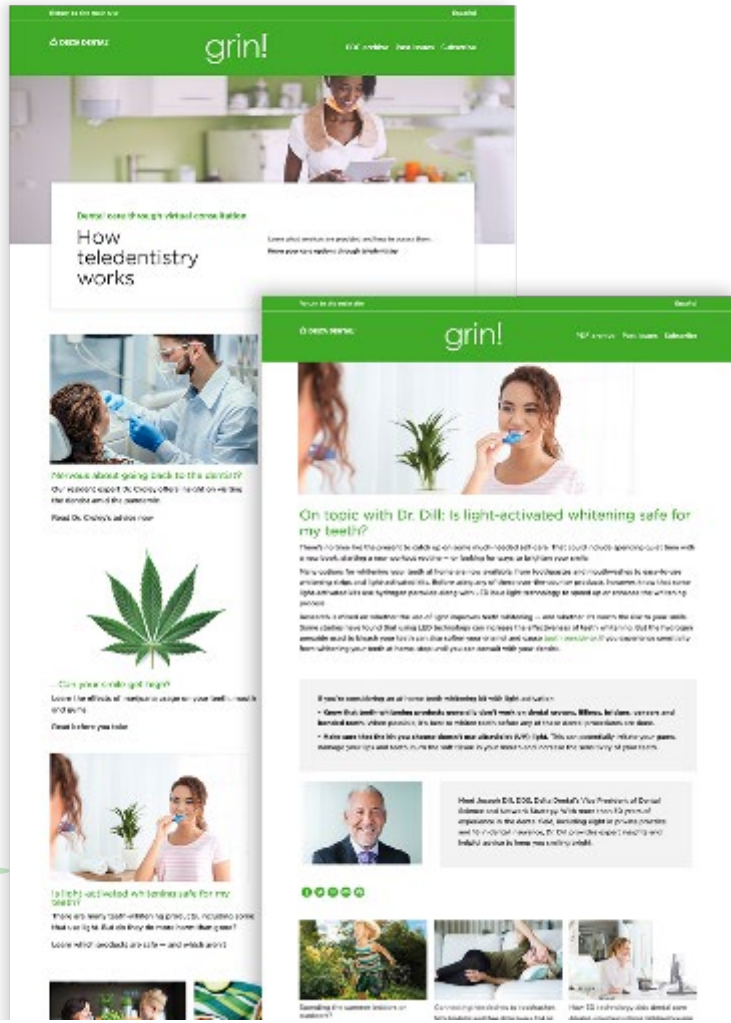
Unlimited
discount
redemption



Wellness
education and
resources

Stay informed with *Grin!*

Boost your dental health IQ



- Learn fun facts and discover tooth-friendly recipes.
- Sign up by email.
- Get a new issue every season.
- ¿Habla español? Disponible en español.

<https://grin.deltadentalins.com/>



Each issue includes kid activities:

- Hands-on arts and crafts
- Coloring pages
- At-home science projects
- Games and puzzles
- Dental health facts



Together we shine.