

Welcome to Delta Dental!

Delta Dental of Ohio is pleased to announce that we will begin providing dental coverage for your school district effective July 1, 2013! You will be covered under two of the nation's largest networks of participating dentists—our Delta Dental PPOSM network and our Delta Dental Premier[®] network. Although you can visit any licensed dentist, you are likely to **save more money** by visiting a dentist who participates in one of these networks.

Frequently Asked Questions

When is the new plan effective?	Delta Dental of Ohio will be the new plan administrator beginning July 1, 2013. Your dental benefits will remain the same.
Do I need to tell my dentist that my insurance has changed?	Yes. Once your coverage becomes effective, you should either tell your dentist that you have Delta Dental of Ohio's PPO (Point-of-Service) coverage or show your reference card at the time of service.
Do I need an ID card to receive treatment?	No. Your dentist can verify your coverage 24 hours a day, seven days a week, by checking the online Dental Office Toolkit. Just let your dentist know that you are covered through Delta Dental of Ohio or present them with your Delta Dental reference card.
What are the advantages of choosing a Delta Dental PPO or Delta Dental Premier dentist?	Although your benefit level for dental services will remain the same regardless of the participating status of the dentist, you will save the <i>most</i> out-of-pocket money if you visit a Delta Dental PPO provider, but you can still save if you visit a Delta Dental Premier provider. You will only be responsible for your copayments and deductible, if any, when you go to a Delta Dental PPO or Delta Dental Premier dentist for covered services. Both Delta Dental PPO and Delta Dental Premier providers are also required to fill out and file claim forms for you, and Delta Dental will send payment directly to the provider – you don't have to pay up front and wait to be reimbursed.
What if my dentist does not participate?	You can still visit a nonparticipating dentist, but you may pay more money out-of-pocket. Delta Dental's payment will be sent to you, and you will need to reimburse your dentist. Your dentist may also require that you make full payment at the time of service, and that you fill out and file your own claim forms.
How can I find out if my dentist participates or find a participating dentist?	You can find out if your dentist participates or find participating dentists by calling Delta Dental's Customer Service department at (800) 524-0149 or by visiting our website at www.deltadentaloh.com .
Can I obtain information about my own eligibility and claims?	Yes. You can review your own claims, print an ID card, access a searchable dentist directory, and more by visiting the Consumer Toolkit [®] located on our website at www.deltadentaloh.com .
Where should claims be submitted for dental services prior to July 1, 2013?	Claims for dental services rendered prior to July 1, 2013, must be submitted to your previous dental administrator to receive reimbursement.
Where should claims be submitted for dental services after July 1, 2013?	Claims for dental services rendered after July 1, 2013, should be sent to Delta Dental at the address listed below.
What if I have met all or a portion of my deductible or annual maximum?	If you have met your deductible prior to July 1, 2013 the deductible from your previous carrier will be carried forward to Delta Dental of Ohio. Proof of the deductible payment may need to be provided for this to apply. Your annual maximum used to date will also be carried forward to Delta Dental of Ohio.
How will orthodontic claims be processed if my plan covers orthodontics?	Delta Dental requires your dentist to submit an orthodontic treatment plan. When orthodontic treatment begins, a percentage of the initial fee will be paid. Monthly payments will be made until the treatment ends or the lifetime orthodontic maximum is reached. If one of your family members is in the middle of orthodontic treatment and has not yet reached his or her lifetime orthodontic maximum, ask the dentist to submit a claim with the complete treatment plan to us as if he or she was submitting the claim for the first time. We will use the information on this claim to calculate the remaining liability based on the number of months left in the treatment plan. We will then make monthly payments until treatment ends or until your family member reaches the lifetime orthodontic maximum.

Your dentist should send all dental claims to Delta Dental at the following address:

Delta Dental
P.O. Box 9085
Farmington Hills, MI 48333-9085
(800) 524-0149
www.deltadentalmi.com

Pricing Examples

	Delta Dental PPO Dentist	Delta Dental Premier Dentist	Nonparticipating Dentist
Major Services payment example for: Crown-Full cast high noble metal (assuming any applicable deductible has been met)	Submitted Fee: \$1000.00 PPO Fee Schedule amount: \$711.00 Delta Dental pays 50% of the PPO fee schedule: \$355.50 Member pays: \$355.50 The PPO dentist cannot charge the \$289 difference between the PPO Fee Schedule amount and his/her fee.	Submitted Fee: \$1000.00 Maximum Approved Fee: \$881.00 Delta Dental pays 50% of the Maximum Approved Fee: \$440.50 Member pays: \$440.50 The Premier dentist cannot charge the \$119 difference between the Maximum Approved Fee and his/her fee.	Submitted Fee: \$1000.00 NonPar Dentist Fee amount: \$683.00 Delta Dental pays 50% of the NonPar Dentist Fee amount: \$341.50 Member pays: \$658.50 Because the dentist does not participate, you are responsible for the difference between Delta's payment and his/her fee.

1. A Delta Dental PPO Dentist is one that has agreed to the Delta Dental PPO Fee Schedule, which is lower than Maximum Approved Fee used for a dentist who participates in Delta Dental Premier.
2. Maximum Approved Fee is the maximum amount approved for a specific procedure determined by Delta Dental in the Delta Dental Premier program.
3. Nonparticipating Dentist Fee is the maximum fee allowed when the dentist does not participate.