

## Delta Dental of Indiana Dental Benefit Highlights for State of Indiana #9840



### Welcome to Indiana's largest dental benefits family!

As a member of Delta Dental of Indiana, you have access to the nation's largest dental networks: Delta Dental PPO and Delta Dental Premier.

- Nationwide, 3 out of 4 dentists participate
- Great access to care as well as reduced fees through our agreements with dentists
- You cannot be balance billed by network dentists - giving you added savings
- Network dentists will complete and file your claim - no paperwork for you
- You only have to pay your copayments and/or deductibles when you receive dental services from a network dentist
- You don't have to pay first, then submit your claim and wait to be reimbursed!

While you can visit nonparticipating dentists, you may be billed the full amount immediately and then wait to be reimbursed.

#### Quality Dental Program

Besides quick and accurate claims processing, *we pay more than 90% of claims in 10 days or less.* Delta Dental also offers world-class customer service from our award winning call center.

#### Online Access

Our online Consumer Toolkit lets you access your dental plan securely over the Internet. You can find a dentist, check benefits, select paperless notices, review claims and amounts used toward maximums, print ID cards, and more at your convenience.

#### A Healthy Smile

Keep your smile healthy with dental benefits from Delta Dental. Your smile is a good indicator of your health. Did you know that your dentist can detect up to 120 different diseases, including diabetes and heart disease? Early detection is one of the best ways to prevent further complications.

#### Questions?

If you have questions, call our Customer Service team at (800) 524-0149 or look online at [www.deltadentalin.com](http://www.deltadentalin.com).

Delta Dental PPO (Point-of-Service)  
Effective: January 1 – December 31, 2013

	PPO Dentist		Premier Dentist		Non-participating Dentist	
	Plan Pays	You Pay	Plan Pays	You Pays	Plan Pays*	You Pays*
<b>Diagnostic &amp; Preventive</b>						
<b>Diagnostic and Preventive Services</b> - exams, cleanings, and fluoride treatments	100%	0%	100%	0%	90%	10%
<b>Emergency Palliative Treatment</b> - to temporarily relieve pain	100%	0%	100%	0%	90%	10%
<b>Sealants</b> - to prevent decay of permanent teeth	100%	0%	100%	0%	90%	10%
<b>Radiographs</b> - X-rays	100%	0%	100%	0%	90%	10%
<b>Basic Services</b>						
<b>Endodontic Services</b> - root canals	80%	20%	80%	20%	70%	30%
<b>Periodontic Services</b> - to treat gum disease	80%	20%	80%	20%	70%	30%
<b>Oral Surgery Services</b> - extractions and dental surgery	80%	20%	80%	20%	70%	30%
<b>Minor Restorative Services</b> - fillings and crown repair	80%	20%	80%	20%	70%	30%
<b>Relines and Repairs</b> - to bridges and dentures	80%	20%	80%	20%	70%	30%
<b>Single Crowns &amp; Cores</b> - used when teeth cannot be restored with another filling material	80%	20%	80%	20%	70%	30%
<b>Major Services</b>						
<b>Other Major Restorative Services (Inlays &amp; Onlays)</b> – used when teeth cannot be restored with another filling material	60%	40%	60%	40%	50%	50%
<b>Prosthodontic Services</b> – bridges and dentures	60%	40%	60%	40%	50%	50%
<b>Orthodontic Services</b>						
<b>Orthodontic Services</b> - braces	60%	40%	60%	40%	50%	50%
<b>Orthodontic Age Limit</b> -	No age limit		No age limit		No age limit	

\* When you receive services from a Nonparticipating Dentist, the percentages in this column indicate the portion of Delta Dental's Nonparticipating Dentist Fee that will be paid for those services. The Nonparticipating Dentist Fee may be less than what your dentist charges and you are responsible for that difference.

**Maximum Payment** - \$1,000 per person total per benefit year on Diagnostic & Preventive, Basic Services and Major Services. Delta Dental's payment for Orthodontic Services will not exceed a lifetime maximum of \$1,125 per eligible person.

**Deductible** - \$50 deductible per person total per benefit year limited to a maximum deductible of \$150 per family per benefit year on Basic Services and Major Services. The deductible does not apply to Diagnostic & Preventive or Orthodontic Services.

Note - This document is only intended to provide a brief description of your benefits. Please refer to your Certificate and summary for a complete description of benefits, exclusions, and limitations.