



Dental Benefits

Provider: Delta Dental

Voluntary dental plans are available to all benefit eligible employees and their eligible dependents.

What Dental Plans are available?

Pasco Schools offer three dental plans for you to choose from:

- DHMO (Delta Care USA)
- PPO Low Plan
- PPO High Plan

What about the networks?

You will have access to a large network of Delta Dental general dentists and specialty dentists. With enrollment in the PPO High or Low plans, you have the freedom to choose to see an in-network or out-of-network provider.

Delta Dental offers both the Delta Dental PPO and Delta Dental Premier Networks. By selecting the Delta Dental PPO network, you will usually achieve greater savings, due to lower negotiated fees. Additionally in this plan you do have the option of using a dentist not participating with Delta Dental; however you will need to file paper claims and it usually results in higher out-of-pocket cost to the member.

If you choose to participate in the DHMO Plan you will have to select a participating dentist from the DeltaCare USA network. In order to be covered for services under the DHMO plan, you must have services provided at your selected DHMO dental office. You can access the network directories of participating dentists by visiting deltadentalins.com.

Is there an age limitation for children to see a pediatric dentist?

If you are enrolled in the DHMO plan, your primary dental office must refer your child (under 8 years of age) to a pediatric dentist. If you are enrolled in the PPO plan- there are no age limits that are applicable.

If you are traveling and experience a dental emergency, please contact Delta Dental customer service and a representative will assist you with treatment options.

What is a diagnostic & preventive maximum waiver (D&P waiver)?

Your PPO plans includes a D&P Maximum Waiver benefit, allowing you to obtain diagnostic and preventive dental services without those costs applying towards the plan year maximum. This benefit promotes good oral health and may reduce the need for more expensive, restorative dental services that can result from undetected oral or related health problems.

Which plans offer an orthodontic benefit?

The DHMO and the PPO High plans offer orthodontic coverage.

Who's eligible?

Primary enrolled employee, spouse, eligible dependent children to age 26. **Coverage will end at the end of the month in which a dependent child reaches age 26** (unless that dependent child is disabled.)

What is a pre-authorization?

We do encourage you to have your dentist submit a preauthorization request for a treatment plan that will cost more than \$300. This will ensure that any of the procedures your dentist suggests are, in fact, covered benefits. It also gives you a chance to find out beforehand what your out-of-pocket expenses will be.

What if I need to see a specialist?

Specialists. The DHMO is a "direct referral" plan. This means your general dentist will refer you to a contracted specialist in your area.

What if I would like a second opinion?

Just let DeltaCare know that you would like another clinical opinion and they will provide the name of a dentist for you to see.

For more information regarding your dental benefit?

Go to the Employee Benefits Department website and follow the links to Delta Dental. To locate an in-network provider please visit www.deltadentalins.com.

Do any of the dental plans have a pre-existing condition clause?

No. There are no pre-existing condition clauses associated with any of the dental plans.

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Who's Eligible: Primary enrollee, spouse, eligible dependent children to age 26	High PPO Plan		Low PPO Plan		DeltaCare USA DHMO	
Dental Network	In-Network	Out-of-Network	In-Network	Out-of-Network	In-Network Only	
Dental Networks- Payment Basis	PPO	Premier/MPA	PPO	PPO	14A	
Plan Year Maximum	\$1,500 per covered member		\$1,000 per covered member		No Plan Year Max for covered members	
Deductible (Per Member/ Per Family) Per Calendar Year	\$75/\$225	\$75/\$225	\$75/\$225	\$75/\$225	Office Visit \$0 Co-Pay	
Diagnostic & Preventive SVC (D&P)	100%	100%	100%	60%	D&P \$0-\$70 Co-Pay	
Deductible Waived for D&P	Yes	Yes	Yes	Yes	N/A	
Basic Service	80%	80%	80%	50%	DeltaCare Schedule A	
Major Services	50%	50%	50%	40%	DeltaCare Schedule A	
Orthodontics- 3 Treatment Levels (applies to DHMO only)	50%		Not Covered		\$1900 Child	\$2100 Adult
Lifetime Ortho Max	\$1,000		Not Covered		N/A	
Coverage Eligibility	Child & Adult		Not Covered		Child & Adult	
Simple Extractions	Basic	Basic	Basic	Basic	DeltaCare Schedule A	
Complex Oral Surgery	Basic	Basic	Basic	Basic	DeltaCare Schedule A	
Endodontics (Root Canal)	Basic	Basic	Basic	Basic	DeltaCare Schedule A	
Periodontics (Gum Disease)	Basic	Basic	Basic	Basic	DeltaCare Schedule A	
Crowns, Bridges, Inlays, Onlays	Major	Major	Major	Major	DeltaCare Schedule A	
Implants	Major	Major	Not Covered		Not Covered	

Dental Rates - per pay deductions

Delta Detail	DHMO 14A		PPO High Plan		PPO Low Plan	
	24 Ded	20 Ded	24 Ded	20 Ded	24 Ded	20 Ded
Employee Employee Emp	\$9.75	\$11.70	\$22.04	\$26.45	\$14.72	\$17.67
Employee + 1 Dependent	\$17.06	\$20.48	\$54.96	\$65.95	\$35.73	\$42.88
EE+ 2 or more Dependents	\$26.82	\$32.18	\$75.23	\$90.28	\$49.88	\$59.86