



Delta Dental PPO (Point-of-Service) Benefits at a Glance Archdiocese of Indianapolis – Employees Group # 1045-0001

Delta Dental looks forward to serving you as an employee of the Archdiocese of Indianapolis. You will be covered under Delta Dental PPOSM (Point-of-Service) beginning on your effective date of coverage. You will be covered under two of the nation's largest dental networks – Delta Dental PPOSM and Delta Dental Premier.

You can continue to see your current dentist; however, if your dentist does not participate in one of our networks, you may pay more. You are likely to save more money by visiting a dentist who is in one of these networks.

You can search for network dentists by visiting Delta Dental's website at www.deltadentalin.com or by calling Delta Dental's Customer Service Center. Customer Service is available Monday to Friday from 8:30 a.m. until 8:00 p.m. (Eastern Time) to help you.

Covered Services:	Delta Dental PPO Dentist	Delta Dental Premier Dentist	Out-of-Network Dentist*			
Diagnostic & Preventive						
Diagnostic and Preventive Services – exams, cleanings, fluoride, space maintainers, and X-rays	100%	100%	100%			
Brush Biopsy – detect oral cancer	100%	100%	100%			
Sealants – to prevent decay of permanent teeth	100%	100%	100%			
Basic Services						
Emergency Palliative Treatment – temporarily relieve pain	80%	80%	80%			
Minor Restorative Services – fillings and crown repair	80%	80%	80%			
Periodontal Maintenance – cleanings following periodontal therapy	80%	80%	80%			
Endodontic Services – root canals	80%	80%	80%			
Periodontic Services – treatment for gum disease	80%	80%	80%			
Simple Extractions – non-surgical removal of teeth	80%	80%	80%			
Other Oral Surgery – dental surgery	80%	80%	80%			
Other Basic Services – miscellaneous services	80%	80%	80%			
Major Service	S					
Major Restorative Services – crowns	50%	50%	50%			
Relines and Repairs – to bridges, implants, and dentures	50%	50%	50%			
TMD Treatment – treatment of the disorder of the temporomandibular joint, including related films	50%	50%	50%			
Prosthodontic Services – bridges, implants, and dentures	50%	50%	50%			
Orthodontic Serv	ices					
Orthodontic Services (treatment for dependent children must begin prior to age 19 and coverage will continue to the end of treatment or until the maximum has been reached)	50%	50%	50%			

^{*}When you receive services from an out of network dentist, the percentages above indicate the portion of Delta Dental's Non-participating Dentist fee that will be paid for those services. The amount may be less than what your dentist charges and you are responsible for the difference.

Maximum Payment - \$750 per person total per calendar year on all services except orthodontics. Orthodontic services have a \$1,500 per person total lifetime maximum.

Deductible -

Delta Dental PPO Dentist or Delta Dental Premier Dentist - \$50 deductible per person total per calendar year with a maximum deductible of \$100 per family per calendar year on all services except diagnostic and preventive services.

Nonparticipating Dentist - \$50 deductible per person total per calendar year with a maximum deductible of \$100 per family per calendar year on all services.

www.deltadentalin.com Customer Service: 1-800-524-0149

What are the benefits of network providers?

Delta Dental PPO and **Delta Dental Premier Dentists**

- Submit claims for you and payment will be sent directly to your dentist.
- Only charges you for your copayment and deductible, if any.
- Out-of-pocket costs are likely lower.

Out-of-Network Dentists

- May require you to submit your own claims.
- You may be responsible for making full payments to your dentist at the time of service.
- Delta Dental will send you a check for amount covered under your plan.

How can I find a network dentist? How can I find out if my dentist is in the network?

You can find network dentists by visiting our website at www.deltadentalin.com or by calling Delta Dental's Customer Service department at (800) 524-0149.

What is the difference between a Delta Dental PPO and a Delta Dental Premier dentist?

Though your benefit level for dental services will remain the same regardless of the participating status of the dentist, **your out-of-pocket costs will likely be the lowest if you use a Delta Dental PPO provider**. This is because Delta Dental PPO providers have agreed to accept a lower fee (in other words, they've agreed to a larger claim discount) than Delta Dental Premier dentists would accept. Because your copayments (if any) are based on a percentage of this fee, the dollar amount of the copayment will be lower if the dentist accepts a lower fee. Please see our included pricing samples for a detailed example.

Where should claims be submitted for services rendered?

For services rendered, either you or your dentists should send your claims to:

Delta Dental PO Box 9085 Farmington Hills, MI 48333-9085

Have Questions?

Please call Delta Dental's Customer Service Department at 1-800-524-0149.

 $\label{eq:NOTE:Payment} \textbf{NOTE: Payment examples are just to demonstrate savings}.$

Fees vary by location and dentist.

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		Delta Dental	Delta Dental Premier	Out-Of-Network	
		PPO Dentist	Dentist	Dentist	
ADULT CLEANING	Dentist Charges:	\$80.00	\$80.00	\$80.00	
	What Delta Dental Accepts:	\$54.00	\$77.00	\$63.00	
	Coverage Level:	100%	100%	100%	
	Amount Delta Dental Pays:	\$54.00	\$77.00	\$63.00	
	AMOUNT YOU PAY:	\$0.00	\$0.00	\$17.00	
CROWN	Dentist Charges:	\$950.00	\$950.00	\$950.00	
	What Delta Dental Accepts:	\$675.00	\$898.00	\$744.00	
	Coverage Level:	50%	50%	50%	
	Amount Delta Dental Pays:	\$337.50	\$449.00	\$372.00	
	AMOUNT YOU PAY:	\$337.50	\$449.00	\$578.00	

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