

Delta Dental PPO MAC Voluntary Plan with DeltaCare DHMO

How to Use Your Dental Benefits

General Information

Dixon School District: **Dixon School District**

What Are My Benefits?

You can find benefit information online at the Subscriber Connection at www.deltadentalil.com and in your certificate of coverage. If you're not sure what your dental plan covers, you can call Delta Dental of Illinois' Customer Service number listed on this sheet.

How Do I Find a Network Dentist?

You have several ways to find up-to-date information on Delta Dental PPO and DeltaCare network dentists and to verify dentists' network participation status:

- For those enrolling in DeltaCare, DeltaCare directories are printed monthly and list office that are closed to new patients (very few DeltaCare offices are closed to new patients).
- You can also easily search for a dentist via Delta Dental of Illinois' (DDIL) website. Go to "Dentist Search" in the subscriber section of the website at www.deltadentalil.com. The website is updated weekly and allows you to search for a dentist by city, state, ZIP code, specialty and/or name.
- For those enrolling in Delta Dental PPO, you can call DDIL's automated phone system, which is available 24 hours a day and provides names of network dentists. To access our automated phone system, call 1-800-323-1743.
- Call one of DDIL's Customer Service representatives at 1-800-323-1743. They are available to answer your questions and help you locate network dentists Monday through Friday from 7:30 a.m. to 5:30 p.m. (Central Time).
- Call your dentist's office and ask if he or she participates in the Delta Dental PPO or DeltaCare network.

If you have questions about your dental coverage, please call DDIL's Customer Service department.

Where Do I Send Claim Forms?

Network dentists file claims on behalf of Delta Dental patients. If you see an out-of-network dentist and he or she doesn't send your claim forms directly to DDIL, you should send the claim to:

Delta Dental of Illinois
P.O. Box 5402
Lisle, Illinois 60532-5402

A high quality dental benefits plan for you... at a low group rate

This plan offers you a chance to buy a quality dental program at a low group rate – *something you couldn't get on your own.*

The Delta Dental PPO MAC Voluntary Plan

The Delta Dental PPO MAC Voluntary Plan works with Delta Dental PPO, our PPO network. The program also gives you the choice of selecting our DeltaCare DHMO plan.

At the time of enrollment, you have a choice between Delta Dental PPO and DeltaCare. *With this program, you must enroll within the required time period (open enrollment). If you don't enroll during this period, you must wait until the next open enrollment. (The only exceptions are if coverage is waived initially due to the existence of other dental coverage that is subsequently lost, or a life-changing event occurs.)*

If you select Delta Dental PPO, you don't have to select a primary care dentist and can choose a Delta Dental PPO network or out-of-network general or specialty dentist at the time of treatment. However, if you go to a **Delta Dental PPO network dentist, your out-of-pocket expenses are likely to be lower** because these dentists agree to accept reduced fees as payment-in-full. In the majority of cases, this translates into reduced copayments for you. There are more than 4,400 dentist locations that participate in Delta Dental PPO in Illinois.

Since Delta Dental PPO dentists are reimbursed directly, if you go to a Delta Dental PPO network dentist, you do not have pay the entire bill upfront and wait to be reimbursed. And all dentists who participate in the Delta Dental PPO network agree to fill out and file claims forms for their patients with Delta Dental coverage so you don't have to hassle with paperwork, either.

If you go to an out-of-network dentist, you'll still be covered, but you may have to pay more because these dentists have not agreed to reduced fees or no "balance billing," which means you will be responsible for any difference between what Delta Dental pays and the dentist's fee. You may also have to file your own claim. (Claim forms can be found on Delta Dental of Illinois' website at www.deltadentalil.com via the "Download Forms" link in the Subscriber section.)

An Option with the Delta Dental PPO MAC Voluntary Plan: DeltaCare

Our affordable DeltaCare dental HMO (or closed panel) option offers comprehensive dental benefits at attractive rates. You will enjoy the cost-saving benefits of minimal or no copayments, no deductibles and no annual benefit maximums. And with DeltaCare, you don't have to worry about claim forms—because there are none.

If you select DeltaCare, you must choose a participating dentist or dental office for you and your covered dependents. If needed, your primary care dentist provides a referral to a DeltaCare participating specialist. You can change provided you have not visited a dentist within the month you want to change. Changes can be called or written, but must be requested by the 20th of the month in order to be effective the first of the following month.

Benefits include preventive, basic and major dental services, and single and family options are offered. An overview of the Delta Dental PPO option is below. **Highlights of the DeltaCare DHMO option are included in a separate Highlight sheet.**

Coverage A

Diagnostic:

- Routine exams twice per benefit year
- Bitewing X-rays twice a year
- Full-mouth X-rays every three years

Preventive:

- Cleanings twice per benefit year
- Fluoride treatments for children under age 19 once per benefit year
- Space maintainers

Coverage B

Minor Restorative:

- Amalgam and resin fillings
- Posterior composites
- Sealants

Coverage Levels

Coverages	Delta Dental PPO Dentist	Out-of-Network Dentist
Coverage A	100% of discounted fees	100% of discounted fees
Coverage B	80% of discounted fees	80% of discounted fees
Coverage C	50% of discounted fees	50% of discounted fees

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Coverage C

Periodontics:

- Treatment of gum disease

Endodontics:

- Root canals and pulpal therapy

Oral Surgery:

- Extractions and other oral surgery (including pre- and post-operative care)

Major Restorative:

- Cast restorations: crowns, onlays, and other ceramic restorations to permanent teeth

- Implants

Prosthodontics:

- Bridges, partial dentures, and complete dentures

Deductibles

The following deductibles apply to coverages B and C:

- In-network and out-of-network: \$50 per person/\$150 per family per benefit year.

Maximums

The following maximum applies:

- \$1,000 per person per benefit year in-network and out-of-network.

You must return an enrollment form! (whether you decide to enroll or waive coverage)

Please contact Dianne Frye at the District Office for more information.

A Few Reminders...

- **Employees not enrolling within the required time period must wait until the next open enrollment. The only exceptions are if coverage is waived initially due to the existence of other dental coverage that is subsequently lost, or a life-changing event occurs.**
- **In the case of the loss of existing dental coverage, the employee or dependent must enroll in the Delta Dental PPO MAC Voluntary Plan Program within 30 days of losing coverage.**
- **Employees cannot drop out of the program until the next open enrollment period. Once an employee drops out of the program, he or she cannot re-enroll unless a life-changing event occurs.**
- **Employees must return an enrollment form, whether they decide to enroll or waive coverage.**