DELTA PREVENTIVE DENTAL



Covered 100%

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Coverage Tier	Employee Only	Employee + Spouse Empl		yee + Children	Employee + Family
Monthly Rates	\$23.30	\$44.16	\$41.51		\$69.25
Dental Benefits		In Network		Out of Network	
Annual Deductible		\$o		\$o	
Annual Maximum Benefit		\$1,000 per insured person		\$1,000 per insured person	
Diagnostic & Preventive					
Exams / Cleanings (twice per year)		Covered 100%		Covered 100%	
Bitewing X-Rays (once per year)		Covered 100%		Covered 100%	

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¹Fluoride treatments are for eligible children to age 19 in combination with cleanings and subject to the same annual limitations. ²Space maintainers are once per space for missing posterior primary teeth for children under age 14.

How to find a network dentist:

From the Delta Dental mobile app or website at <u>https://www.deltadentalct.com</u>

1. Click on "Find a Dentist"

Full mouth X-Rays (once every 5 years)

Fluoride Treatment¹ (twice per year)

Space Maintainers² (once per space)

- 2. Enter city, zip, or partial address
- 3. Select the distance you are willing to travel
- 4. Select the "Delta Dental PPO" network
- 5. Click "Search"

For additional questions, call Delta Dental Customer Service at 1.800.452.9310

Affordable Dental Benefits

Exams & Cleanings covered 100%

> See any dentist in or out of network

This form is a benefit highlight representing a brief description of the coverage available. The controlling provisions will be in the group policy issued by Delta Dental.