



# Hello.

Welcome to Delta Dental of Alaska, the place you go when you want more than a dental plan – because good health is about so much more than just the plan details.

You know your group needs quality coverage, programs, online tools and, most important, partnerships that help them along the way.

We offer all of that and more – and we're excited to help your group start on a journey to be better.

For our part, we'll provide networks of dentists, caring customer service and a dedicated team here to support you. For your part, we ask that your group simply comes ready to find healthy moments every day.

Because together, we can be more.  
We can be better.



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## Quality coverage for your group's smile

Healthy teeth are happy teeth. With our small group Delta Dental of Alaska plans, your group members have access to Delta Dental, the nation's largest dental network. Their smile will thank them, wherever they roam.

Moda Health began as ODS in 1955, providing dental plans to folks in the Northwest. In 1966, we were a founding member of the Delta Dental Plans Association. Today, through Delta Dental of Alaska, we're proud to offer affordable, quality Delta Dental plans.

### Dental benefit highlights

Our Delta Dental of Alaska plans connect members with great benefits and quality in-network dentists. They can count on:

- Freedom to choose a dentist
- Filed-fee savings from in-network dentists
- Cleanings every six months
- Predetermination of benefits if requested in a pretreatment plan
- No claim forms
- Fast and accurate claims payment
- Superior customer service

Our dental plans also include useful online tools, resources and special programs for members who need a little extra attention for their pearly whites.

### Dental Optimizer puts oral health on their radar

Powered by Microsoft HealthVault, Dental Optimizer™ lets members store dental health information and share it with caregivers. The result? More coordinated and effective care.

To get started, members log in to myModa at [modahealth.com](http://modahealth.com) and look for Dental Optimizer. Then they can try out tools, like risk assessment quizzes and a treatment cost calculator. Along the way, members learn about:

- Preventing dental disease
- The latest and most effective treatments
- Saving out-of-pocket costs

### Oral Health, Total Health

Research shows a strong link between oral health and overall health. We believe that when members see a dentist regularly and keep their mouth and teeth healthy, they help keep the rest of their body healthy, too. Through our Oral Health, Total Health program, we offer additional preventive benefits to members who are diabetic or pregnant and in their third trimester.

We also provide other evidence-based dental benefits, including routine oral cancer screenings with every exam. If a member needs additional screening, we cover brush biopsy, a nonsurgical method of detecting abnormal cells in the mouth.

## Delta Dental networks go where members go

Each Delta Dental of Alaska plan comes with a Delta Dental network. It includes thousands of dentists across the state, and the country.

### Is a dentist in-network?

To find out, members can visit [modahealth.com](http://modahealth.com) and use Find Care.

### 2016 dental networks

#### Delta Dental Premier Network

Wherever members go, their Delta Dental of Alaska benefits go with them. This is the largest dental network in Alaska and nationally. It includes three out of every five providers in Alaska and over 151,000 Delta Dental Premier Dentists nationwide, serving 50 states, the District of Columbia and Puerto Rico.

#### Delta Dental PPO Network

The preferred provider option (PPO) dental network in Anchorage and the Mat-Su Valley includes over 125 participating providers and offers access to over 99,000 Delta Dental PPO Dentists nationwide.

### Enjoy total cost control

By negotiating charges for certain services, we help members save on out-of-pocket costs.

Premier and PPO network dentists agree to accept our contracted fees as full payment. They also don't balance bill – the difference between the allowed amount and the dentist's fee. If members see providers outside the network, they may pay more for care.

## Dental plan options

We offer a variety of plans so you can find the right fit for your team. Choose from these types of dental plans. You can choose the coverage and price to suit you.

### Delta Dental Premier plans

Premier plans offer groups access to the Delta Dental Premier Network. Providers accept the Delta Dental contracted fee, so there will be no balance billing. Employees with this plan have the freedom to choose their own dentist.

### Delta Dental PPO plans

These plans help groups in Anchorage and the Mat-Su Valley save costs by connecting employees with providers in the Delta Dental PPO Network. Members receive in-network benefits when seeing a Delta Dental PPO Network dentist. For out-of-network benefits, members can save money by seeing providers in the Delta Dental Premier Network. In both cases, providers accept the Delta Dental contracted fee, so there will be no balance billing.

### Delta Dental pediatric plan

Our Delta Dental Premier Radiant Smiles pediatric plan offers child-only benefits to members. It also meets the federal pediatric essential health benefits (EHB) requirement for those age 19 and over. Groups can purchase this plan for their employees even if no one enrolls right away.

### Delta Dental Premier Mandated plan

This plan connects members with the Delta Dental Premier Network. Members access coverage for preventive dental care services only. Providers accept the Delta Dental contracted fee, so there will be no balance billing.

### Voluntary plans

These Delta Dental voluntary plans offer the same great value and variety as our standard plans, but allow flexible group contribution and participation. Groups can elect to have their plans funded up to 100 percent by employees.

- Versatility to attract and retain staff
- 50 to 100 percent funded by employees
- Participation can be as low as 25%

## Prepare for a healthy start

Keeping your group members healthy is an investment that pays dividends. After all, when they feel great, they're more apt to hit a few home runs for the team.

### Business requirements

Here are some of the finer points about enrolling your small group in our plans. To learn more, contact us or a Delta Dental-certified agent.

- **Confirm your eligibility.** Your business must be located in Alaska and have one to 50 employees.
- **Enroll by the 15th of the month.** New group medical enrollment information must be received no later than the 20th of the month prior to the desired effective date.

- **Choose an employee eligibility waiting period.** The waiting period refers to the length of time between date of hire and coverage date. It cannot exceed 90 days.
- **Make changes to plans upon renewal.** Changes may include, but are not limited to, eligibility waiting periods, group plan choices, employer eligibility changes and contribution or participation amounts.

### Voluntary plan guidelines

For groups that don't currently offer dental, a voluntary dental plan could be a perfect fit. These plans require less contribution and participation, so employers can reduce their financial risk while offering all of the same benefits. Groups of 10 or more employees can choose a Delta Dental voluntary plan.

### Group contribution and participation

Group size	Minimum employer contribution		Minimum participation	
	For employees	For dependents	For employees	For dependents
<b>Dental-only coverage</b>				
1 - 4	N/A	N/A	N/A	N/A
5 - 50	50%	0%	70%	25%

### Voluntary group contribution and participation

Group size	Minimum employer contribution		Maximum employer contribution		Minimum participation	
	For employees	For dependents	For employees	For dependents	For employees	For dependents
<b>Dental-only coverage</b>						
1 - 9	N/A	N/A	N/A	N/A	N/A	N/A
10 - 50	0%	0%	49%	49%	25%	0%

## Ready to enroll?

Once you determine your eligibility, simply follow these steps to enroll:



### Decide on your plans

Pick from the 2016 small group plans listed in this brochure.

To get more details about our plans, or for help enrolling, please call us or a Delta Dental-certified agent.

### Enroll

Our small group plans are available directly through us and the Marketplace, HealthCare.gov.

### Welcoming your group members

Once you're enrolled, members will receive a welcome letter that confirms their plan and includes their subscriber ID number. Their ID card will arrive in a separate mailing. They can use their ID number to log in to myModa at [modahealth.com](http://modahealth.com). Then it's easy to find in-network providers, access health resources and review the Member Handbook to get familiar with their plan.



# 2016 Delta Dental Premier plan benefit table

	Delta Dental Premier Pinnacle plan 2000   2500 <sup>2</sup>		Delta Dental Premier Advance plan 1000   1500   2000		Delta Dental Premier Practical plan 1000   1500		Delta Dental Premier Practical plan 2000	
	Under age 19	Ages 19+	Under age 19	Ages 19+	Under age 19	Ages 19+	Under age 19	Ages 19+
<b>Calendar year costs</b>								
Deductible per person	\$50 per person / \$150 family		\$50 per person / \$150 family		\$50 per person / \$150 family		\$50 per person / \$150 family	
Out-of-pocket maximum (under age 19)	\$350 for one member / \$700 for two or more members		\$350 for one member / \$700 for two or more members		\$350 for one member / \$700 for two or more members		\$350 for one member / \$700 for two or more members	
Annual maximum for groups 1-9 (age 19+)	N/A		\$1000   \$1500		\$1000   \$1500		N/A	
Annual maximum for groups 10-50 (age 19+)	\$2000   \$2500		\$1000   \$1500   \$2000		\$1000   \$1500		\$2,000	
<b>Class 1</b>								
Exams & X-rays	0%	0%	0%	0%	0%	20%	0%	20%
Cleanings	0%	0%	0%	0%	0%	20%	0%	20%
Periodontal maintenance	0%	0%	0%	0%	0%	20%	0%	20%
Sealants	0%	0%	0%	0%	0%	20%	0%	20%
Topical fluoride	0%	0% <sup>1</sup>	0%	0% <sup>1</sup>	0%	20% <sup>1</sup>	0%	20% <sup>1</sup>
Space maintainers	0%	Not covered	0%	Not covered	0%	Not covered	0%	Not covered
<b>Class 2</b>								
Restorative fillings	20% after deductible	20% after deductible	20% after deductible	20% after deductible	20% after deductible	20% after deductible	20% after deductible	20% after deductible
Oral surgery	20% after deductible	20% after deductible	20% after deductible	20% after deductible	20% after deductible	20% after deductible	20% after deductible	20% after deductible
Endodontics	20% after deductible	20% after deductible	20% after deductible	20% after deductible	20% after deductible	20% after deductible	20% after deductible	20% after deductible
Periodontics	20% after deductible	20% after deductible	20% after deductible	20% after deductible	20% after deductible	20% after deductible	20% after deductible	20% after deductible
<b>Class 3</b>								
Restorative crowns	50% after deductible	50% after deductible	50% after deductible	50% after deductible	50% after deductible	50% after deductible	50% after deductible	50% after deductible
Partial & complete dentures	50% after deductible	50% after deductible	50% after deductible	50% after deductible	50% after deductible	50% after deductible	50% after deductible	50% after deductible
Implants	50% after deductible	50% after deductible	50% after deductible	50% after deductible	50% after deductible	50% after deductible	50% after deductible	50% after deductible
Orthodontia	50% after deductible <sup>3</sup>	Not covered	50% after deductible <sup>3</sup>	Not covered	50% after deductible <sup>3</sup>	Not covered	50% after deductible <sup>3</sup>	Not covered
<b>Features</b>								
Location	All areas		All Areas		All Areas		All Areas	
Plan enrollment options	Direct through modahealth.com only		Direct through modahealth.com only		Through HealthCare.gov only		Direct through modahealth.com only	
Provider network	Delta Dental Premier Network		Delta Dental Premier Network		Delta Dental Premier Network		Delta Dental Premier Network	
Balance bill	Delta Dental Premier Network: No Nonparticipating: Yes		Delta Dental Premier Network: No Nonparticipating: Yes		Delta Dental Premier Network: No Nonparticipating: Yes		Delta Dental Premier Network: No Nonparticipating: Yes	

<sup>1</sup> Covered once in a 12-month period if there is recent history of periodontal surgery or high risk of decay because of medical disease or chemotherapy or similar type of treatment.

<sup>2</sup> The Pinnacle plan includes coverage for composites on teeth outside the smile line, nitrous with a 12-month exclusion period and Preventive 1 (Class 2 and Class 3 services apply to annual maximum).

<sup>3</sup> Only medically necessary orthodontia is covered with a 2-year exclusion period.

These benefits and Delta Dental of Alaska policies are subject to change in order to be compliant with state and federal guidelines. This brochure provides summaries of various dental plans and is not a contract. If there is any discrepancy between the summaries and the contract, it is the contract that will control.

# 2016 Delta Dental PPO plan benefit table

	Delta Dental PPO Properous plan 1000   1500   2000				Delta Dental Premier Radiant Smiles plan		Delta Dental Premier Mandated plan	
	Under age 19		Ages 19+		Under age 19	Ages 19+	Under age 19	Ages 19+
	In-network you pay	Out-of-network you pay	In-network you pay	Out-of-network you pay				
<b>Calendar year costs</b>								
Deductible per person	\$50 per person / 150 family		\$50 per person / 150 family		\$50 per person / \$150 family		\$25 per person / \$75 per family	
Out-of-pocket maximum (under age 19)	\$350 for one member / \$700 for two or more members (in-network only)		N/A		\$350 for one member / \$700 for two or more members		N/A	
Annual maximum for groups 1-9 (age 19+)	N/A		\$1000, \$1500		N/A		\$500 (applies to all ages)	
Annual maximum for groups 10-50 (age 19+)	N/A		\$1000   \$1500   \$2000		N/A		\$500 (applies to all ages)	
<b>Class 1</b>								
Exams & X-rays	0%	20%	0%	10%	0%	Not covered	0% after deductible	0% after deductible
Cleanings	0%	20%	0%	10%	0%	Not covered	0% after deductible	0% after deductible
Periodontal maintenance	0%	20%	0%	10%	0%	Not covered	Not covered	Not covered
Sealants	0%	20%	0%	10%	0%	Not covered	0% after deductible	Not covered
Topical fluoride	0%	20%	0% <sup>1</sup>	10% <sup>1</sup>	0%	Not covered	0% after deductible	0% after deductible <sup>1</sup>
Space maintainers	0%	20%	Not covered	Not covered	0%	Not covered	Not covered	Not covered
<b>Class 2</b>								
Restorative fillings	20% after deductible	40% after deductible	10% after deductible	30% after deductible	20% after deductible	Not covered	Not covered	Not covered
Oral surgery	20% after deductible	40% after deductible	10% after deductible	30% after deductible	20% after deductible	Not covered	Not covered	Not covered
Endodontics	20% after deductible	40% after deductible	10% after deductible	30% after deductible	20% after deductible	Not covered	Not covered	Not covered
Periodontics	20% after deductible	40% after deductible	10% after deductible	30% after deductible	20% after deductible	Not covered	Not covered	Not covered
<b>Class 3</b>								
Restorative crowns	50% after deductible	50% after deductible	50% after deductible	50% after deductible	50% after deductible	Not covered	Not covered	Not covered
Partial & complete dentures	50% after deductible	50% after deductible	50% after deductible	50% after deductible	50% after deductible	Not covered	Not covered	Not covered
Implants	50% after deductible	50% after deductible	50% after deductible	50% after deductible	50% after deductible	Not covered	Not covered	Not covered
Orthodontia	50% after deductible <sup>2</sup>	50% after deductible <sup>2</sup>	Not covered	Not covered	50% after deductible <sup>2</sup>	Not covered	Not covered	Not covered
<b>Features</b>								
Location	Anchorage and the Mat-Su Valley		Anchorage and the Mat-Su Valley		All Areas		All Areas	
Plan enrollment options	Direct through modahealth.com only		Direct through modahealth.com only		Direct through modahealth.com only		Direct through modahealth.com only	
Provider network	Delta Dental PPO Network		Delta Dental PPO Network		Delta Dental Premier Network		Delta Dental Premier Network	
Balance bill	Delta Dental PPO and Premier Networks: No Nonparticipating: Yes		Delta Dental PPO and Premier Networks: No Nonparticipating: Yes		Delta Dental Premier Network: No Nonparticipating: Yes		Delta Dental Premier Network: No Nonparticipating: Yes	

<sup>1</sup> Covered once in a 12-month period if there is recent history of periodontal surgery or high risk of decay because of medical disease or chemotherapy or similar type of treatment.  
<sup>2</sup> Only medically necessary orthodontia is covered with a 2-year exclusion period.

These benefits and Delta Dental of Alaska policies are subject to change in order to be compliant with state and federal guidelines. This brochure provides summaries of various dental plans and is not a contract. If there is any discrepancy between the summaries and the contract, it is the contract that will control.

# 2016 Delta Dental voluntary plan benefit table

	Delta Dental Premier Advance Voluntary plan 1000   1500		Delta Dental Premier Practical Voluntary plan 1000   1500		Delta Dental PPO Properous Voluntary plan 1000   1500			
	Under age 19	Ages 19+	Under age 19	Ages 19+	Under age 19		Ages 19+	
					In-network you pay	Out-of-network you pay	In-network you pay	Out-of-network you pay
<b>Calendar year costs</b>								
Deductible per person	\$50 per person / \$150 family		\$50 per person / \$150 family		\$50 per person / \$150 family		\$50 per person / \$150 family	
Out-of-pocket maximum (under age 19)	\$350 for one member / \$700 for two or more members		\$350 for one member / \$700 for two or more members		\$350 for one member / \$700 for two or more members (in-network only)		N/A	
Annual maximum for groups 1-9 (age 19+)	N/A		N/A		N/A		N/A	
Annual maximum for groups 10-50 (age 19+)	\$1000   \$1500		\$1000   \$1500		N/A		\$1000   \$1500	
<b>Class 1</b>								
Exams & X-rays	0%	0%	0%	20%	0%	20%	0%	10%
Cleanings	0%	0%	0%	20%	0%	20%	0%	10%
Periodontal maintenance	0%	0%	0%	20%	0%	20%	0%	10%
Sealants	0%	0%	0%	20%	0%	20%	0%	10%
Topical fluoride	0%	0% <sup>1</sup>	0%	20% <sup>1</sup>	0%	20%	0% <sup>1</sup>	10% <sup>1</sup>
Space maintainers	0%	Not covered	0%	Not covered	0%	20%	Not covered	Not covered
<b>Class 2</b>								
Restorative fillings	20% after deductible	20% after deductible	20% after deductible	20% after deductible	20% after deductible	40% after deductible	10% after deductible	30% after deductible
Oral surgery	20% after deductible	20% after deductible	20% after deductible	20% after deductible	20% after deductible	40% after deductible	10% after deductible	30% after deductible
Endodontics	20% after deductible	20% after deductible	20% after deductible	20% after deductible	20% after deductible	40% after deductible	10% after deductible	30% after deductible
Periodontics	20% after deductible	20% after deductible	20% after deductible	20% after deductible	20% after deductible	40% after deductible	10% after deductible	30% after deductible
<b>Class 3</b>								
Restorative crowns	50% after deductible	50% after deductible	50% after deductible	50% after deductible	50% after deductible	50% after deductible	50% after deductible	50% after deductible
Partial & complete dentures	50% after deductible	50% after deductible	50% after deductible	50% after deductible	50% after deductible	50% after deductible	50% after deductible	50% after deductible
Implants	50% after deductible	50% after deductible	50% after deductible	50% after deductible	50% after deductible	50% after deductible	50% after deductible	50% after deductible
Orthodontia	50% after deductible <sup>2</sup>	Not covered	50% after deductible <sup>2</sup>	Not covered	50% after deductible <sup>2</sup>	50% after deductible <sup>2</sup>	Not covered	Not covered
<b>Features</b>								
Location	All Areas		All Areas		Anchorage and the Mat-Su Valley		Anchorage and the Mat-Su Valley	
Plan enrollment options	Direct through modahealth.com only		Direct through modahealth.com only		Direct through modahealth.com only		Direct through modahealth.com only	
Provider network	Delta Dental Premier Network		Delta Dental Premier Network		Delta Dental PPO Network		Delta Dental PPO Network	
Balance bill	Delta Dental Premier Network: No Nonparticipating: Yes		Delta Dental Premier Network: No Nonparticipating: Yes		Delta Dental PPO and Premier Networks: No Nonparticipating: Yes		Delta Dental PPO and Premier Networks: No Nonparticipating: Yes	

<sup>1</sup> Covered once in a 12-month period if there is recent history of periodontal surgery or high risk of decay because of medical disease or chemotherapy or similar type of treatment.  
<sup>2</sup> Only medically necessary orthodontia is covered with a 2-year exclusion period.

These benefits and Delta Dental of Alaska policies are subject to change in order to be compliant with state and federal guidelines. This brochure provides summaries of various dental plans and is not a contract. If there is any discrepancy between the summaries and the contract, it is the contract that will control.



## Delta Dental orthodontia riders

If your group has more than 26 employees, help them freshen up their smiles with orthodontic care. These dental plan riders close the gap on happier teeth and are available to groups that choose a non-voluntary plan.

### Orthodontia riders

	Child Ortho 1000	Child Ortho 1500	Adult Ortho 1000	Adult Ortho 1500	Adult & Child Ortho 1000	Adult & Child Ortho 1500
Lifetime maximum	\$1,000	\$1,500	\$1,000	\$1,500	\$1,000	\$1,500
What members pay						
Members age 17+	Not covered	Not covered	50%	50%	50%	50%
Members under age 17	50% <sup>1</sup>	50% <sup>1</sup>	Not covered	Not covered	50%	50%
Plan enrollment options	Direct through <a href="http://modahealth.com">modahealth.com</a>					

<sup>1</sup> Covered only for children. Treatment must start prior to child's 17th birthday.

## Limitations and exclusions for dental plans

These are some common limitations and exclusions for our 2016 Delta Dental of Alaska small group dental plans. For a full list of limitations and exclusions per plan or for copies of plan summaries, please call us at 888-374-8910.

### Limitations

- Delta Dental Premier Radiant Smiles plan benefits are only available for members under age 19
- Delta Dental Premier Mandated plan includes preventive services only and has different limits. Call us for details.

#### Class 1

- Exam once in a six-month period
- Bitewing X-rays once in a six-month period under age 19 and once in a 12-month period age 19 and over
- Full-mouth or panoramic X-rays once in a five-year period
- Prophylaxis (cleaning) or periodontal maintenance is covered once in any 6-month period. Additional periodontal maintenance is covered for members with periodontal disease, up to a total of 4 cleanings per year
- Fluoride once in a six-month period under age 19
- Sealants limited to unrestored occlusal surface of permanent molars once per tooth in a three-year period under age 19 and once in a five-year period age 19 and over

#### Class 2 and Class 3

- Bridges and dentures once in a five-year period under age 19 and once in a seven-year period age 19 and over
- Crowns and other cast restorations once in a five-year period under age 19 and once in a seven-year period age 19 and over
- Crown over implant once in a five year period when dentally necessary under age 19 and once per lifetime per tooth space age 19 and over
- IV sedation or general anesthesia only with surgical procedures
- Scaling and root planing once in a two-year period
- Tooth-colored fillings or crowns on back teeth limited to amount allowed for metallic restoration except for Delta Dental Premier Pinnacle Plan
- Night guard (occlusal guard) covered at 50% once per year between ages 13 and 19 and once in a 5-year period up to \$150 maximum for ages 19 and over. Over-the-counter night guards are excluded.
- Athletic mouth guard covered at 50% once in any 12-month period for members age 15 and under and once in any 24-month period age 16 and over. Over-the-counter athletic mouth guards are excluded.

### Exclusions

- Anesthetics, analgesics, hypnosis and medications, including nitrous oxide except for IV sedation or general anesthesia with surgical procedures (nitrous is covered for adults in Delta Dental Premier Pinnacle Plan)
- Charges above the reimbursement amount
- Charting (including periodontal, gnathologic)
- Congenital or developmental malformations for age 19 and over
- Cosmetic services
- Duplication and interpretation of X-rays
- Experimental or investigational treatment
- Hospital costs or other fees for facility or home care
- Instructions or training (including plaque control and oral hygiene or dietary instruction)
- Orthodontia (exception for medically necessary treatment under age 19 or when an orthodontia rider is included)
- Precision attachments
- Rebuilding or maintaining chewing surfaces (misalignment or malocclusion) or stabilizing teeth
- Services or supplies available under any city, county, state or federal law, except Medicaid
- Temporomandibular joint syndrome (TMJ)
- Treatment not dentally necessary

## We're here to help

To learn more about our dental plans and resources, visit [modahealth.com](http://modahealth.com). Choose the tab for employers and explore group plans. We're also available to guide you through the plan selection and administration process. If you need a hand, please let us know!

### Faster benefits administration with EOS

Taking care of group benefits can be complicated. We're here to make it feel quick and easy. Our Employer Online Services (EOS) tool gives you the freedom to manage your team's coverage in your own way. After enrolling, log in for free, 24 hours a day, seven days a week to:

- Enroll new members
- Order ID cards
- Update address and personal information
- Terminate coverage
- View eligibility

### Contact us

Have questions about our plans or need marketing materials? Our friendly and knowledgeable team members are here to assist you.

#### Anchorage

510 L Street, Suite 270  
Anchorage, AK 99501

907-278-2626 or toll-free at 888-374-8910,  
Monday through Friday,  
8:30 a.m. to 5 p.m. Alaska Time

#### Portland (corporate headquarters)

601 S.W. Second Ave.  
Portland, OR 97204-3156

503-243-3948 or toll-free at 800-578-1402,  
Monday through Friday,  
7:30 a.m. to 4 p.m. Alaska Time

TTY users, please call 711.

## Answers to your questions

### What payment methods do you accept?

We accept checks, cash, money orders and electronic funds transfer (EFT) from a savings or checking account.

### Does it matter which dentist members see?

Yes. Members will save money by seeing an in-network provider for their plan:

- **Delta Dental Premier plans** – Members can save money by seeing providers in the Delta Dental Premier Network. These providers accept the Delta Dental contracted fee, so there will be no balance billing.

- **Delta Dental PPO plans** – Members can visit providers in the Delta Dental PPO Network for the best benefit. They are the in-network providers for these plans. If members go out-of-network, they can save money by seeing providers in the Delta Dental Premier Network. In both cases, providers accept the Delta Dental contracted fee, so there will be no balance billing.

## Healthcare lingo explained

We realize that dental plans can be confusing, so we've made you a cheat sheet of sorts. If you have questions, please contact us at 888-374-8910.

### Balance billing

Charges for out-of-network care beyond what the dental plan allows. Out-of-network providers may bill members the difference between the maximum plan allowance and their billed charges. In-network providers generally don't do this.

### Coinsurance

The percentage members pay for a covered dental service after they meet their deductible. For example, they may pay 20 percent of an allowed \$200 charge, or \$40.

### Deductible

The amount members pay in a calendar year for care that requires a deductible before the dental plan starts paying. Disallowed charges do not apply toward the deductible.

### Dental annual maximum

The maximum dollar amount a dental plan will pay toward the cost of dental care for members ages 19 and over within a calendar year.

### Filed-fee savings

Savings due to a Premier or PPO network dentist's accepted or contracted fee with Delta Dental.

### Marketplace

Also called an Exchange, a health plan Marketplace is where people can buy health coverage and apply for federal financial assistance. Alaska residents use the federal Marketplace, HealthCare.gov.

### Out-of-pocket maximum (dental)

In dental plans, the most members pay in a calendar year for covered pediatric dental care services before benefits are paid in full up to the allowable amount or up to any visit limit. Once members meet the out-of-pocket maximum, the plan covers eligible expenses at 100 percent. The out-of-pocket maximum includes deductibles and coinsurance. It does not include disallowed charges or balance billing from out-of-network dentists.

### PPO dentist

A dentist contracted in the PPO network. By choosing a PPO dentist, members' out-of-pocket expenses will be less than if they choose a dentist outside of the PPO network.

