



Welcome!



Delta Dental of Indiana

800-524-0149 | www.deltadentalin.com



Welcome to Delta Dental.

We are pleased to provide your dental benefits coverage, and we look forward to serving you.

Delta Dental provides the advantages of two of the nation's largest networks of participating dentists—our Delta Dental PPO™ network and our Delta Dental Premier® network.

This packet includes general information about what you can expect as a Delta Dental member. It also contains resources to help you understand coverage and learn how to use your benefits. (Please see your Summary of Dental Plan Benefits to review your specific plan details.) In addition, our website (www.deltadentalin.com) is an online resource for locating participating dentists, accessing your plan details, managing your account and finding oral health information.

If you have questions about your new dental benefits, please call our customer service department at 800-524-0149. Our automated inquiry system is available 24/7 and can answer most questions. Customer service representatives are available Monday through Friday from 8:30 a.m. to 8 p.m. ET.



Definitions

Certificate	A standard booklet provided by Delta Dental to subscribers explaining their dental benefit coverage.
Copayment	As provided by your plan, the percentage of the charge, if any, that you will have to pay for covered services.
Covered services	The unique benefits selected in your plan detailed in the Summary of Dental Plan Benefits and Certificate.
Summary of Dental Plan Benefits	A description of the specific provisions of your group dental plan.
Deductible	Amount a person or family must pay toward covered services before Delta Dental begins paying for services.
Maximum payment	The maximum dollar amount Delta Dental will pay in any benefit year or lifetime for covered dental services.
Delta Dental PPO dentist fee schedule	The maximum amount allowed per procedure for services rendered by a Delta Dental PPO participating dentist as determined by that dentist's local Delta Dental plan.
Maximum approved fee	A system used by Delta Dental to determine the approved fee for a procedure rendered by a Delta Dental Premier participating dentist.
Nonparticipating dentist fee	The maximum fee allowed per procedure for services rendered by a nonparticipating dentist.
Balance billing	The difference between the submitted fee and the approved fee that can be charged to the patient by a nonparticipating dentist. Delta Dental participating dentists do not balance bill.
Pre-treatment estimate	A written estimate of benefits that may be available under your plan for your proposed dental treatment.

This booklet only includes a sample summary of definitions. Please refer to your certificate for full details.



The connection: oral and overall health

Did you know that your mouth holds clues to what's going on with your overall health? During a routine checkup, your dentist can search for clues that may point to other serious health issues. Dentists can detect more than 120 signs and symptoms of nondental diseases by examining your mouth, head and neck. Plus, more than 90 percent of systemic diseases have oral manifestations. This means that if something is wrong in your mouth, then something could be wrong in another part of your body.

If you have one of the conditions listed below, ask your dentist how you can better manage your oral health to prevent infection and improve your condition. In some cases, Delta Dental covers additional cleanings for individuals that have one of these conditions:

- Diabetes and periodontal (gum) disease
- Pregnancy and periodontal (gum) disease
- Certain heart conditions that put you at high or moderate risk for infective endocarditis
- Kidney failure or undergoing dialysis
- Suppressed immune system due to chemotherapy or radiation treatment, HIV-positive status, organ transplant, or stem cell (bone marrow) transplant

You may even see savings on procedures not covered under your dental plan if you visit a Delta Dental participating dentist. Most non-covered services are still subject to approved fees contracted between the dentist and Delta Dental, so the savings are passed on to you, the patient.

Dental coverage is about more than saving money. Oral health is an essential part of overall health. Delta Dental uses scientific evidence to enhance plan designs in ways that improve health and save money.



Save money and stay in network with Delta Dental

With your Delta Dental PPO (Point-of-Service) plan, you may save more money and receive higher levels of coverage when visiting a Delta Dental PPO dentist. Our PPO dentists have agreed to accept lower fees as full payment for covered services. However, if you go to a dentist who doesn't participate in Delta Dental PPO, you can still save money if your dentist participates in Delta Dental Premier. Like our PPO dentists, Delta Dental Premier dentists agree to accept Delta Dental's fee determination as full payment for covered services.

DELTA DENTAL NETWORKS	Delta Dental PPO	- No balance billing on covered services - Most significant network discounts with more than 381,800 office locations nationwide* - Dentists file claims for member
	Delta Dental Premier	- No balance billing on covered services - Significant network discounts with the most office locations nationwide—more than 448,400* - Dentists file claims for member
OUT OF NETWORK	Out-of-network dentist	- May be balance billed - No discounts - May need to file own claims

*National network statistics: Delta Dental Plans Association, December 2020.

Example of how it works

As shown below, your lowest out-of-pocket costs result from going to either a Delta Dental PPO or Delta Dental Premier dentist.

		DELTA DENTAL PPO DENTIST	DELTA DENTAL PREMIER DENTIST	OUT-OF-NETWORK DENTIST
ADULT CLEANING	Submitted fee	\$80	\$80	\$80
	Maximum allowed fee	\$54	\$77	\$63
	Coverage level	100%	100%	100%
	Amount Delta Dental pays	\$54	\$77	\$63
	AMOUNT YOU PAY	\$0	\$0	\$17
CROWN	Submitted fee	\$1,100	\$1,100	\$1,100
	Maximum allowed fee	\$754	\$989	\$799
	Coverage level	50%	50%	50%
	Amount Delta Dental pays	\$377	\$494.50	\$399.50
	AMOUNT YOU PAY	\$377	\$494.50	\$700.50

NOTE: Payment examples above are illustrative only. Fees and reimbursements can vary by location and dentist. They do, however, represent how payment is determined.

Member Portal—Access your benefit information 24/7

Stay current on your dental benefits with Delta Dental's easy-to-use Member Portal. This secure online tool is designed to give you 24/7 access to important information regarding your dental benefits, including:

- Eligibility information
- Current benefits information (such as how much of your yearly benefit has been used to date, how much is still available to use, levels of coverage for specific dental services, etc.)
- Specific claims information, including what has been approved and when it was paid

The site also allows you to elect to receive your EOB statements electronically, print claim forms and identification cards, and browse oral health information.

All users must register to gain access to the Member Portal. Privacy of your online benefit information is assured through highly secure encryption technology.

To start taking advantage of this innovative tool, follow these simple steps:

1. Visit www.memberportal.com.
2. Log in.

NOTE: Member Portal has replaced Consumer Toolkit®. If you currently have a Consumer Toolkit account, your username and password for Consumer Toolkit will work for Member Portal.

- If you have already registered, enter your credentials and click the “Login” button.
- If you are new to Member Portal, click the “Sign up!” link to register.

NOTE: You will need the subscriber's (the person whose name is on the benefit package) member ID. The member ID is an assigned number unique to the subscriber. In most cases, the member ID is the same as the subscriber's Social Security number.

3. Complete required fields and follow the on-screen instructions.
4. Select your own username and password to access the site.

Additional help can be accessed through the Help menu within Member Portal. If you need further assistance, call Toolkit Support at 866-356-0301.

Manage your dental benefits on the go!

The Delta Dental mobile app makes it easy for you to get the most out of your dental benefits anytime, anywhere. Once registered for Member Portal, mobile app users can find a dentist, use a toothbrushing timer, check claims, view coverage and display their ID card. Plus, members can access information for themselves or covered dependents! Visit the App Store (Apple) or Google Play (Android), and search for Delta Dental to download and install the app.

Eligibility

The screenshot shows the 'Home' page of the Delta Dental Member Portal for Winston Churchill. It displays the subscriber's name, Delta Toolkit, Inc., and a table of family members with their relationship, effective dates, and status. A 'Find a Provider' search bar is also visible.

Name	Relationship	Effective Date	DOB	Status	Benefits	Claims	Life Events
James Churchill	Subscriber	01/01/2020	03/12/1978	ACTIVE	View	View	03/12/2020
James Churchill	Dependent	01/01/2020	10/12/1990	ACTIVE	View	View	03/12/2020
Anna Churchill	Dependent	01/01/2020	05/12/2018	ACTIVE	View	View	03/12/2020

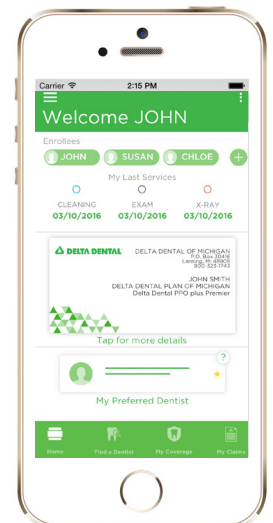
Up-to-date benefit information

The screenshot shows the 'Coverage for Winston Churchill' page. It includes a search bar for procedure codes, a table of major procedure categories (Preventive, Diagnostic, Brush Biopsy) with their respective plan pay percentages, and a summary of deductibles and maximums for the subscriber and family.

Category	Plan Pay
Preventive	100%*
Diagnostic	100%*
Brush Biopsy	100%*

Deductible and Maximums for Winston Churchill

Category	Deductible	Maximum
GENERAL DEDUCTIBLE	\$0	\$2,000
GENERAL MAXIMUM	\$0	\$2,000
ORTHODONTIC MAXIMUM	\$0	\$7,000



Frequently asked questions about Delta Dental coverage

What is required for enrollment in Delta Dental?

Your benefits administrator will provide you with information about how to enroll.

What are my benefits?

You can find this information in your Summary of Dental Plan Benefits and your certificate or by logging in to Member Portal.

Do I need to tell my dentist my coverage has changed?

Yes. At your first dental visit after coverage becomes effective, you should tell your dentist that you have Delta Dental of Indiana coverage. A standard reference card will be provided to you with this information.

Do I need an ID card to receive care?

No. It is not necessary to present a personalized ID card to receive treatment. Your dental office will use your Social Security number (or alternate ID) to verify eligibility and benefits, and to submit claims. If you prefer a personalized ID card, you may print one using Member Portal.

How can I find out if my dentist participates with Delta Dental or find a participating dentist?

To find a participating dentist, use the link on our homepage at www.deltadentalin.com or log in to Member Portal. You can also call your dentist's office and ask if he or she participates with Delta Dental PPO or Delta Dental Premier.

Do I have to go to a participating dentist?

No. You may visit any licensed dentist; however, you may pay more money out of pocket at a nonparticipating provider. You'll be responsible for paying the nonparticipating dentist whatever he or she charges at the time of service. You will receive a payment from Delta Dental based on the dentist's submitted fee or Delta Dental's nonparticipating dentist fee, whichever is less. You also may have to submit your own claims if you choose a nonparticipating dentist.

How can I contact Delta Dental's customer service?

Customer service can be reached at 800-524-0149. Our automated inquiry system is available 24/7 and can answer most questions quickly. Representatives are available to assist you Monday through Friday from 8:30 a.m. to 8 p.m. ET. To submit a written inquiry, please send to: Delta Dental, PO Box 9089, Farmington Hills, MI 48333-9089. Please include your name, group name and number, and the subscriber's member ID number when writing.

How do I submit a claim?

Delta Dental participating dentists will file claim forms for you. If you choose to visit a nonparticipating dentist, you may be required to file your own claim forms. Forms can be downloaded at www.deltadentalin.com. Send completed forms to: Delta Dental, PO Box 9085, Farmington Hills, MI 48333-9085.

Where should claims be sent for services rendered prior to my Delta Dental effective date?

Claims for dental services rendered prior to the plan's effective date must be submitted to your previous dental administrator to receive reimbursement.

What if I'm in the middle of treatment when my new coverage becomes active?

Delta Dental will cover services completed on or after your effective date.

If my plan includes orthodontia coverage, how will orthodontic claims be processed?

Dentists are required to submit an orthodontic treatment plan. A percentage of the total fee will be paid when orthodontic treatment begins. Payments will be based on the type of treatment or until the lifetime orthodontic maximum is reached.

Please remember to enroll as directed by your benefits administrator in a timely fashion.

Visit www.deltadentalin.com to learn more about Delta Dental.

