

Delta Dental Individual & Family™

Delta Dental PPO™
Basic Plan for Families
Plan year 2027



Your dentist, your choice

Save out of pocket on the care you need

Is a Delta Dental PPO plan right for me?

Delta Dental PPO plans are great if you like to have plenty of options when it comes to your care. With access to the largest network in the country¹, Delta Dental PPO plans let you:

- Choose any dentist, though you'll save the most at a Delta Dental PPO dentist.
- See specialists without referrals.
- Stay on top of your oral health with low cost or covered exams and cleanings.

Underwriter

Delta Dental Insurance Company
P.O. Box 660138
Dallas, TX 75266

Claims and Correspondence

P.O. Box 1809
Alpharetta, GA 30023

Customer Service

888-857-0314

<https://www1.deltadentalins.com/exchange>

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How does Delta Dental PPO work?

Delta Dental PPO is a dental insurance plan that helps you pay for covered dental services. After you meet your annual deductible (a set dollar amount you pay out of pocket), Delta Dental will pay a portion of your bill (up to your annual maximum).² You won't need an ID card to get care. Just give your information to your dentist and they can find your coverage.

- Visit any dentist for care, but save the most with a Delta Dental PPO dentist. PPO dentists accept reduced fees and won't charge you more than your expected share of the bill.
- Kids can use their full benefits immediately. Adults may have a waiting period for some services. Check your plan highlights for details or [**the Health Care Exchange \(Marketplace\) plans page**](#) for more information.

When you want a plan that will help cover your costs while offering you the freedom to see the dentist of your choice, choose a Delta Dental PPO plan.

This benefit information is only a summary and is not intended to replace or serve as the plan policy. Please **consult the plan policy** for a description of plan benefits, limitations and exclusions. In the event of any inconsistency between this document and the plan policy, the terms of the policy will prevail. View the complete benefits overview, limitations and exclusions, or call **888-857-0314**.

¹ Delta Dental Premier is the largest dentist network nationwide based on total unique dentists, as of September 2023, according to Zelis Network360.

² For adult benefits, you are responsible for all charges once you reach your plan maximum.

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Plan Highlights^{1, 2}

Deductibles and Maximums per Calendar Year	Pediatric Benefits (up to age 19)				Adult Benefits (age 19 and older)			
	Delta Dental PPO or Delta Dental Premier Dentist		Non-Delta Dental Dentist		Delta Dental PPO or Delta Dental Premier Dentist		Non-Delta Dental Dentist	
Deductible Per enrollee Family	\$55		\$85		\$50 \$150			
Deductible Waived for Diagnostic and Preventive Services	No		No		No		No	
Annual Maximum Maximum the plan will pay each year for services per person.	None		None		\$1,000			
Out-of-Pocket Maximum After this amount is reached, the plan pays 100% of the remaining covered services for that year. ³	\$450 for one pediatric enrollee \$900 for two or more pediatric enrollees		\$450 for one pediatric enrollee \$900 for two or more pediatric enrollees		None		None	
Covered Services	Delta Dental Pays	Enrollee Pays	Delta Dental Pays	Enrollee Pays	Delta Dental Pays	Enrollee Pays	Delta Dental Pays	Enrollee Pays
Diagnostic and Preventive Services	100%	0%	100%	0%	100%	0%	100%	0%
Basic Services	50%	50%	50%	50%	50%	50%	50%	50%
Major Services	50%	50%	50%	50%	Not a benefit		Not a benefit	
Orthodontic Services Medically necessary (requires prior authorization)	50%	50%	50%	50%	Not a benefit		Not a benefit	
Waiting Periods	None		None		None		None	

¹ Reimbursement to dentists is based on contracted fees. Limitations or waiting periods may apply for some benefits; some services may be excluded from your plan. Please refer to your plan Policy for complete limitations and exclusions for this plan.

² Coverage may not be available in all areas. If applicable, service areas are detailed in the limitations and exclusions.

³ The Out-of-Pocket Maximums for Delta Dental PPO or Delta Dental Premier dentists and for Non-Delta Dental dentists are separate. If only one Pediatric Enrollee is covered and switches among types of dentists during a Calendar Year, the total paid in Out-of-Pocket Maximums would not exceed \$750 each Calendar Year. If two or more Pediatric Enrollees are covered and Pediatric Enrollee(s) switch among types of dentists during a Calendar Year, the total paid in Out-of-Pocket Maximums would not exceed \$1,500 each Calendar Year.

Can you read this document? If not, free language assistance services are available to you. Appropriate auxiliary aids and services to provide information in accessible formats are also available free of charge. Please call 888-857-0314 (TTY: 711).

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Quý vị có đọc được tài liệu này không? Nếu không, quý vị có thể sử dụng dịch vụ hỗ trợ ngôn ngữ miễn phí. Các dịch vụ và hỗ trợ bổ sung thích hợp để cung cấp thông tin ở các định dạng dễ tiếp cận cũng được cung cấp miễn phí. Vui lòng gọi điện 888-857-0314 (TTY: 711). (Vietnamese)

이 문서를 읽을 수 있습니까? 그렇지 않은 경우, 무료 언어 지원 서비스를 이용할 수 있습니다. 정보를 이해할 수 있는 형식으로 제공하기 위한 적절한 보조 도구 및 서비스도 무료로 제공됩니다. 888-857-0314 (TTY: 711) 번으로 전화해 주십시오. (Korean)

Կարո՞ղ եք կարդալ այս փաստաթուղթը: Եթե ոչ, ապա Ձեզ հասանելի են անվճար լեզվական օգնության ծառայություններ: Մատչելի ձևաչափերով տեղեկատվություն տրամադրելու համար համապատասխան օժանդակ փնջոցներն ու ծառայությունները նույնպես հասանելի են անվճար: Խնդրում եմ զանգահարել 888-857-0314 (TTY՝ 711): (Armenian)

می‌توانید این سند را بخوانید؟ اگر نمی‌توانید، خدمات کمک زبانی به‌صورت رایگان در دسترس شما قرار دارد. امکانات و خدمات کمکی مناسب برای ارائه اطلاعات در قالب‌های دسترسی‌پذیر نیز به‌صورت رایگان در اختیارتان قرار دارد. لطفاً تماس بگیرید (Persian Farsi) 888-857-0314 (TTY: 711).

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क्या आप यह दस्तावेज़ पढ़ सकते हैं? यदि नहीं तो आपके लिए निःशुल्क भाषा सहायता सेवाएं उपलब्ध हैं। सुलभ प्रारूपों में जानकारी उपलब्ध कराने के लिए उपयुक्त सहायक साधन और सेवाएं भी निःशुल्क उपलब्ध हैं। कृपया कॉल करें 888-857-0314 (TTY: 711)। (Hindi)

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ਕੀ ਤੁਸੀਂ ਇਹ ਦਸਤਾਵੇਜ਼ ਪੜ੍ਹ ਸਕਦੇ ਹੋ? ਜੇ ਨਹੀਂ, ਤਾਂ ਤੁਹਾਡੇ ਲਈ ਮੁਫਤ ਭਾਸ਼ਾ ਸਹਾਇਤਾ ਸੇਵਾਵਾਂ ਉਪਲਬਧ ਹਨ। ਸੁਵਿਧਾਜਨਕ ਫਾਰਮੈਟ ਵਿੱਚ ਜਾਣਕਾਰੀ ਦੇਣ ਲਈ ਉਚਿਤ ਸਹਾਇਕ ਸਾਧਨ ਅਤੇ ਸੇਵਾਵਾਂ ਵੀ ਮੁਫਤ ਵਿੱਚ ਉਪਲਬਧ ਹਨ। ਕਿਰਪਾ ਕਰਕੇ ਕਾਲ ਕਰੋ 888-857-0314 (TTY: 711)। (Punjabi)

Koj nyeem puas tau daim ntaub ntawv no? Yog tias tsis tau no, ces yuav muaj kev pab cuam txhais lus pab dawb rau koj. Cov khoom pab thiab cov kev pab cuam ntxiv uas tsim nyog los muab ntaub ntawv qhia paub ua hom ntaub ntawv uas siv tau kuj yuav muaj yam tsis tsub nqi dab tsi ntxiv. Thov hu rau 888-857-0314 (TTY: 711). (Hmong)

តើ អ្នកអាចអានឯកសារនេះបានទេ? ប្រសិនបើ មិនបានទេ សេវាជំនួយផ្នែកភាសាឥតគិតថ្លៃអាចរកបានសម្រាប់អ្នក។ ជំនួយ និងសេវាជំនួយដែលសមស្របដើម្បីផ្តល់ព័ត៌មានក្នុងទម្រង់ដែលអាចងាយប្រើបាន ក៏អាចរកបានដោយឥតគិតថ្លៃផងដែរ។ សូមហៅទូរសព្ទទៅ 888-857-0314 (TTY: 711)។ (Cambodian)

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Díí naaltsoos baa nitsáháskeesgo shíł yá'áhoot'é? Doo shíł łahgo át'é da, t'áá ánooldó' t'óó' baa áhání bik'í'diilyaago baa nitsáhákeesgo at'é. Ákót'éego bee áháya t'áá áłtso bá hólónígíí dóó yá'át'éehígíí bee náníká be'elya, dóó t'áá ánooldó' bila' ashíí. T'áá shá naaltsoos bikáá' ách'í' haasdzíí dooleeł 888-857-0314 (TTY: 711) (Navajo)