See which network is right for you:



- **1.** Go to **deltadentalins.com** and click "Find a dentist" at the top of the screen.
- **2.** Enter your ZIP code and select the network based on the dental plan you chose.
- **3.** For DeltaCare USA DHMO select "DeltaCare USA."
- **4.** For DPPO select "Delta Dental PPO."
- 5. Click on "Find a Dentist."

Dental benefits

For 2024, you can choose between the DeltaCare USA (DHMO) and the Delta Dental PPO plans.

Delta Dental HMO Plan (DeltaCare USA DHMO)

The DHMO Plan offers a wide range of dental benefits through a network of participating dentists. Your DeltaCare USA plan is a copayment plan available in AL, MO, OK, OR, TN, TX and WI. With your DeltaCare USA DHMO plan, some preventive services are covered at 100%. Your plan also covers many other dental services at a set copay. **There are no annual maximums and no deductibles.**

Procedure	Copayment	
Office visit	\$0 per visit – office visit fee (per patient, per office visit in addition to any other applicable patient charges)	
Preventive services	\$0 exams \$10 sealant permanent molars (per tooth) \$0 X-rays	
Crowns	\$160-\$380 – titanium	
Orthodontics	\$1,150-\$1,900 – child \$2,100 – adult	
Root canals	\$110-\$350	
Extractions	\$50-\$130	
General anesthesia	\$80	

When you enroll in DeltaCare USA DHMO:

- Delta Dental will assign a primary care dentist based on your ZIP code
- You will receive welcome materials that include a welcome letter with your assigned dentist, plan booklet and ID card
- You can request a change to your primary care dentist at anytime. Simply visit our website and log on to your online account or contact customer service. Change requests received by the 21st of the month will be effective the first day of the following month.
- Each family member can select his or her own primary care network dentist
- Refer to your evidence of coverage/plan booklet for the full copayment schedule
- You must visit your primary dentist to receive benefits

Delta Dental PPO Plan (Delta Dental DPPO)

Visit a dentist in the PPO network to maximize your savings. Network dentists have agreed to reduced fees and you won't get charged more than your expected share of the bill. If you cannot find a PPO network dentist, then Delta Dental Premier is your next-best option. Under this plan, you have freedom to visit any licensed dentist or specialist without a referral, however, Delta Dental dentists offer cost protections and convenient services. The Dental PPO Plan offers access to Delta Dental dentists and out-of-network benefits. The DPPO dental plan will cover eligible dental expenses after you meet any applicable waiting periods and meet any deductibles. The plan is based on coinsurance levels that determine the percentage of costs covered by the plan for different types of services.

Procedure	Network	Out-of-network
Deductible (per person)	\$50 (maximum of \$150)	\$50 (maximum of \$150)
Annual maximum benefit (per person)*	\$2,000	\$2,000
Preventive	100%, no deductible	100%, no deductible
• 2 cleanings per calendar year		
• 2 exams per calendar year		
 2 fluoride treatments per calendar year for dependent children under age 19 		
• Full mouth X-rays: 1 per 60 months		
 Bitewing X-rays: 1 set per calendar year for adults; 2 per calendar year per child to age 18 		
Basic restorative	80% after deductible	80% after deductible
• Fillings		
• Extractions		
• Oral surgery		
• Periodontal treatment		
• Endodontics: Root canal		
 General anesthesia: In conjunction with covered oral surgery, and select endodontic and periodontic procedures 		
Major restorative	50% after deductible	50% after deductible
 Benefits begin after 6 months of coverage 		
• Crowns		
• Denture and bridges		
• Implants		
Orthodontia	50% after lifetime	50% after lifetime
• Benefits begin after 12 months of coverage;	deductible	deductible
orthodontic lifetime deductible and maximum (per person)	\$1,750	\$1,750

*Diagnostic and preventive services do not count toward the annual maximum