



Heluna Health®

EMPOWERING POPULATION
HEALTH INITIATIVES SINCE 1969

DELTA DENTAL PLANS

Choosing the right dental plan can be challenging. Everyone's needs are different, and each dental plan works differently. Use this tool to help compare HMO and PPO dental plans.



It is highly recommended that you request a treatment plan prior to any non-routine procedures and submit the treatment plan for predetermination of benefits.

Predetermination of benefits will give you a clear understanding of all your anticipated costs (deductible, coinsurance and reaching maximum benefit limit).

If you would like assistance with obtaining predetermination of benefits, please contact the Employee Support Center at 855.670.2222 or by email at LosAngeles.ESC@ajg.com

Heluna Health Benefits Department

Benefits@HelunaHealth.org

Tel: 562.205.2433

Fax: 562.222.7373



DENTAL PLAN OPTIONS

DELTA DENTAL HMO PLAN OPTION

Dental HMO plan is designed to help you and your family maintain oral health and reduce your out-of-pocket costs. This type of insurance requires some type of prepayment from you. In exchange, you get dental care from a network of dental care providers. If you want to use a dentist outside the approved network, you must pay your entire dentist's bill yourself.

- You must choose a DHMO network general dentist. You won't be covered if you go to a dentist who's not in the DeltaCare DHMO network.
- If you do not select a DHMO dentist when you first enroll, Delta Dental will assign a dentist for you.
- Delta Dental's ID card will have the name of the DHMO dentist you are assigned to on the plan.

CAN I SELECT A DIFFERENT PCD FOR MYSELF AND MY DEPENDENTS?

Yes, you can select different Primary Care Dentist (PCD) and/or dental group for yourself and each of your dependents.

WHEN CAN I CHANGE MY PCD OR DENTAL GROUP?

You must seek all dental services with the dentist you are assigned to. You may change the dentist you are assigned to for any reason. You must contact Delta Dental prior to the 15th of the month for new provider to be assigned the 1st of the following month.

WHAT IF I NEED A SECOND OPINION?

You can request a second opinion from a different network general dentist by calling Delta Dental's customer service; they will help you make the necessary arrangements.

DELTA DENTAL PPO PLANS (HIGH AND LOW OPTIONS)

You may self-refer to any dentist, but you will have a higher benefit level and lower out-of-pocket costs if you visit a Delta Dental PPO network dentist.

- Savings are greater when you visit an In-Network provider because Delta Dental's contracted dentists have agreed to provide care at a negotiated rate.
- Out-of-Network benefit amounts are subject to the Delta Dental contracted fee schedule. You will be responsible for the difference between the plan payment and the dentist's usual charge.

TRANSITION OF CARE FOR ORTHODONTICS

Orthodontic transition allows patients who are under an orthodontist's care through another dental insurance plan to continue seeing the same orthodontist that was treating their case prior to becoming a member of Delta Dental Plan. In order to be considered for orthodontic transition, the subscriber needs to complete an Orthodontic Transition of Care Summary form (posted on UKG's portal) and send it to Delta Dental.





DeltaCare USA: a prepaid, fixed copayment plan with added benefits.

Over 400 procedures are covered by your HMO plan including tooth whitening.

- Copayments are all-inclusive:
- No lab fees or other hidden fees
- No additional charges for metals or porcelain

Treatment for pre-existing conditions (except work in progress), including missing or extracted teeth, is covered under your plan.

Out-of-area emergency care:

You and your eligible dependents have out-of-area coverage for dental emergencies when you are more than 35 miles from your primary care dentist.

Your out-of-area emergency benefit (typically limited to \$100 per person) is for services to relieve pain until you can return to your primary care network dentist. Standard plan limitations, exclusions and copayments may apply.

DENTAL HMO

FOR CA MEMBERS ONLY

DELTA DENTAL HMO	
HMO DENTAL PLAN BENEFITS ¹	HMO NETWORK
PLAN MAXIMUMS	
Calendar Year Deductible	None
Calendar Year Maximum Benefit	None
PREVENTIVE PROCEDURES	
Office Visits	\$5
D1110/D1120 Cleaning Adult/Child	\$0
D0210 – D0330 X-rays & Imaging	\$0
RESTORATIVE PROCEDURES	
D2391 White Filling (posterior)	\$55
D3330 Molar Endodontics (root canal)	\$250
D4261 Periodontal Osseous Surgery (gum disease)	\$225
D4342 Periodontal Scaling & Root Planning (gum disease)	\$20
MAJOR PROCEDURES	
D5110 – D5120 Complete Denture (maxillary or mandibular)	\$145
D5211 – D5212 Partial Denture (maxillary or mandibular)	\$120
D6240 Pontic (porcelain fused to a high noble metal)	\$240
D6750 Crown (porcelain fused to a high noble metal)	\$240
D7220 Surgery to remove impacted tooth (soft tissue)	\$50
ORTHODONTIA	
Comprehensive Orthodontic Treatment (child—up to age 19)	\$1,700
Comprehensive Orthodontic Treatment (adult)	\$1,900

EMPLOYEE SEMI-MONTHLY CONTRIBUTIONS

- Employee
- Employee + Spouse
- Employee + Child(ren)
- Employee + Family

DELTA DENTAL HMO

- \$0.00
- \$6.22
- \$3.11
- \$10.90

¹Please refer to UKG to access the Delta Dental HMO Patient Charge Schedule for a complete description of the dental plan benefits.



DENTAL PPO

FOR CA & OUT OF STATE MEMBERS

DENTAL PPO PLAN BENEFITS	DELTA DENTAL LOW DPPO			DELTA DENTAL HIGH DPPO	
	DELTA PPO ¹	DELTA PREMIER ¹	OUT OF NETWORK ²	IN NETWORK + DELTA PREMIER ¹	OUT OF NETWORK ²
PLAN MAXIMUMS					
Calendar Year Deductible (Single)	\$25	\$100	\$100	\$25	
Calendar Year Deductible (Family)	\$75	\$300	\$300	\$75	
Calendar Year Maximum Benefit		\$1,500 per person		\$1,500 per person	
PREVENTIVE & DIAGNOSTIC CARE					
Oral Examinations, Bitewing or Full Mouth X-rays, Cleanings and Sealants	0% deductible waived	0% deductible waived	0% deductible waived	0% deductible waived	0% deductible waived
BASIC RESTORATIVE PROCEDURES					
Fillings, Endodontics (root canal therapy), Periodontics, Simple Oral Surgery and Simple Extractions	20%	50%	50%	20%	20%
MAJOR RESTORATIVE CARE					
Crowns, Inlays, Onlays and Cast Restorations	50%	60%	60%	50%	50%
Implant Services	20%	50%	50%	20%	20%
ORTHODONTIA					
Orthodontia Lifetime Maximum (Adult and Child)		Not Covered		\$1,500 per person	
Orthodontia Benefit (Adult and Child)		Not Covered		50%	50%

EMPLOYEE SEMI-MONTHLY CONTRIBUTIONS

Employee
Employee + Spouse
Employee + Child(ren)
Employee + Family


DELTA DENTAL LOW PPO

\$22.22
\$45.50
\$28.54
\$56.21

DELTA DENTAL HIGH PPO

\$30.29
\$61.14
\$54.70
\$95.73

¹Reimbursement based on Delta Dental's Fee Schedule. Members are not subject to balance billing.
²Reimbursement based on Delta Dental's Maximum Allowable Charges. Members may be subject to balance billing.
³Reimbursement based on Delta Dental's Program Allowance. Members may be subject to balance billing.

 Sign up as a member online to print ID cards, locate providers, view benefits or claims and access cost estimator tool.

www.deltadentalins.com



CHOOSING THE RIGHT DPPO

When you need dental care, choosing an in-network dentist is always a good idea. That's because network dentists have agreed to offer reduced fees and abide by Delta Dental policies—and have met industry standards for care, safety and cleanliness. Each PPO plan offers access to one or more of Delta Dental's dentist networks.

Delta Dental's Networks: What's the Difference?

DELTA DENTAL PPO™

Provides access to more than 112,000 dentists in 278,000+ locations nationwide.

Reduced Fees

Delta Dental PPO dentists are always considered contracted providers and offer the deepest discounts on dental procedures.

Stretch Your Maximum Dollars

Since fees are usually the lowest, your annual maximum dollars would go further.

Balance Billing

Your dentist can't charge you above his or her accepted fees. You will not receive a bill for the difference in balance due.

DELTA DENTAL PREMIER

More than 156,000 participating dentists in 342,000+ locations nationwide.

Reduced Fees

Premier dentists have agreed to reduced fees; however, these fees are higher than Delta Dental PPO provider fees.

Stretch Your Maximum Dollars

Your maximum dollars may go further than with a non-Delta Dental dentist, but not as far as with a PPO dentist

Balance Billing

High Plan: Your dentist can't charge you above his or her accepted fees.

Low Plan: You may be subject to some balance billing.

Save on Your Dental Bills! Compare Your Options

			
Member Name	Joe	Sue	Ben
Procedure	Tooth Filling	Tooth Filling	Tooth Filling
Network Used	PPO In Network (Fee Schedule)	Delta Premier	Out of Network
Coinsurance	20%	20%	20%
Provider Fee	\$125	\$125	\$125
Fee Schedule/MAC	\$100	\$110	\$100
Delta Dental Pays (Low/High)	\$80	\$88	\$80
Member Pays (Low/High)	\$20	\$37 (Low Plan)/\$22 (High Plan)	\$45
Provider Write-off (Low/High)	\$25	\$0 (Low Plan)/\$15 (High Plan)	\$0

The above chart is for illustrative purposes. Actual fees and discounts will vary by dentist and area.



Where's my Delta Dental ID Card?

If you've been looking for your dental plan ID card, we have good news for you: You don't need one!

Just tell your dental office the Delta Dental company through which you receive benefits and provide your name, your date of birth, your enrollee ID number (or social security number) and the name of your employer.

Want an ID card anyway?

Go to deltadentalins.com, log in to Online Services, then click on **Print ID card**.

You can also pull it up on your smartphone by downloading the **Delta Dental app** (by the Delta Dental Plans Association) from the App Store or Google Play.



BrushSmart to Transform Your Oral Health!

BrushSmart is a new oral wellness program, exclusively for Delta Dental HMO and PPO plan enrollees, that offers personalized solutions, oral care and discounts on the products that help you improve your dental care routine.

Sign up today to get special discounts on Phillips Sonicare products. To get started:

- Go to brushsmart.org
- Fill out the sign-up section
- Check the user agreement box, then click the **Join BrushSmart** button.
- That's it! You'll receive your coupon code and a confirmation email.

DELTA DENTAL PROVIDER SEARCH

Use the below steps to find HMO and PPO In Network dentists, specialists and orthodontists

- 1 Go to www.deltadentalins.com/find-a-dentist
- 2 Under "**Find a Dentist**" on the right hand side of the screen, enter your Address, Zip Code, City, or State
- 3 **For the HMO Plan:** From the "Select Network" drop down menu select "**DELTACARE USA**"
For the PPO Plan: From the "Select Network" drop down menu select "**DELTA DENTAL PPO**" or "**DELTA DENTAL PREMIER**"
- 4 Click "**Search**" to generate a list of contracted providers. Click "**Refine search**" to filter by categories such as specialty, network and language.

REMINDER

For best results, please sign up on www.deltadentalins.com or download the **Delta Dental Mobile App** to access member specific provider search results and other information.