

## State of Minnesota Employees & Retirees

Plan Benefit Highlights		
Service & Description*	State Dental Plan	Non-Participating**
<b>Calendar Year Plan Maximum</b> Does not apply to Diagnostic & Preventive, and Orthodontic Services	\$2,000 per person	
<b>Lifetime Ortho Maximum</b>	\$3,000 per person	
<b>Deductible</b> Per person / per family per calendar year No deductible for diagnostic and preventive services or orthodontics	\$50/person \$150/family	\$125/person
Covered Services	Dental Benefit Plan Coverage	
Service & Description*	State Dental Plan	Non-Participating**
<b>Diagnostic &amp; Preventive Services</b> Exams Cleanings X-rays Fluoride treatments Space Maintainers Sealants	100%	50% of maximum allowable fee**
<b>Basic Services</b> Emergency treatment for relief of pain Amalgam restorations (silver fillings) Composite resin restorations (white fillings) on anterior (front) teeth	80%	50% of maximum allowable fee**
<b>Endodontics</b> Root canal therapy on permanent teeth Pulpotomies on primary teeth for dependent children	80%	50% of maximum allowable fee**
<b>Periodontics</b> Surgical/Nonsurgical periodontics	80%	50% of maximum allowable fee**
<b>Oral Surgery</b> Surgical/Nonsurgical extractions All other covered oral surgery	80%	50% of maximum allowable fee**
<b>Major Restorative</b> Crowns Composite resin restorations (white fillings) on posterior (back) teeth	80%	50% of maximum allowable fee**
<b>Prosthetic Repairs and Adjustments</b> Denture adjustments and repairs Bridge repair	80%	50% of maximum allowable fee**
<b>Prosthetics</b> Dentures (full and partial) Bridges Dental implants	80%	50% of maximum allowable fee**
<b>Orthodontics</b> Treatment for the prevention/correction of malocclusion	80%	50% of maximum allowable fee**

\*This is a summary of benefits only and does not guarantee coverage. For a complete list of covered services and limitations/exclusions, please refer to the State Dental Plan Summary of Benefits.

\*\*Dentists who have signed a participating network agreement with Delta Dental have agreed to accept the maximum allowable fee as payment in full. Non-participating dentists have not signed an agreement and are not obligated to limit the amount they charge; the member is responsible for paying any difference to the non-participating dentists. While you are free to visit any dentist, we encourage you to visit a State Dental Plan dentist to receive the higher level of benefits and to avoid additional out-of-pocket costs.

**May I go to any dentist?**

You have the freedom to see any dentist – there are no requirements for you to pre-select a dentist and no referral authorizations are ever needed.

However, through a unique contractual agreement, Delta Dental also maintains a network of **State Dental Plan** dentists that includes about 2,300 licensed dentists, practicing at over 3,800 locations.

Dentists who participate in the State Dental Plan network have agreed not to charge more than the maximum allowable amount. This can result in lower out-of-pocket costs. As an added convenience, you never have to file a claim when you use a State Dental Plan dentist—the dentist files the claim for you.

**How do I find a State Dental Plan dentist?**

Finding a State Dental Plan dentist is easy! 3 simple ways to find a dentist:

- Visit [www.deltadentalmn.org/segip](http://www.deltadentalmn.org/segip)
- Call Customer Service locally at (651) 406-5916 or toll-free at (800) 553-9536
- Ask your dentist if they are a State Dental Plan provider

**What happens if I visit an out-of-network dentist?**

If dental services are received from an out-of-network dentist, your out-of-pocket cost will be greater and you will be responsible for paying the difference between the maximum allowable amount and what the dentist charges. You may be responsible for submitting your own claim. The address to submit claims is on the back of your Delta Dental ID card. In addition, reimbursement for covered services will be paid directly to you.

**How do I find out if my claim was paid?**

You can use our online claims inquiry tool to see your claims in detail by going to [www.deltadentalmn.org/segip](http://www.deltadentalmn.org/segip). You may also call Customer Service at (651) 406-5916 or toll-free at (800) 553-9536 to obtain claims status and payment information.

**How is dental work-in-progress handled?**

For services started prior to your effective date under the State Dental Plan, payment of the claim is based on the service completion date.

**How do I know how much I'll be responsible for?**

Request your dentist submit a pre-treatment estimate to Delta Dental of Minnesota for determination of benefits and financial responsibility prior to the service. A Pretreatment Estimate of Benefits statement will be sent to you and your dentist.

**Still have questions?**

Be sure to go to [www.deltadentalmn.org/segip](http://www.deltadentalmn.org/segip) and look for the 'Quick Links for Members' for additional Frequently Asked Questions.

**Prefer to speak with a Delta Dental Customer Service Representative?**

Call us toll-free at (800) 553-9536.