



Delta Dental of Nebraska

# 2024 Pediatric Dental Essential Health Benefits

Certified, stand-alone pediatric dental plans for those under age 19

Pediatric dental coverage for dependents under age 19 is one of 10 Essential Health Benefits (EHBs) required under the federal Affordable Care Act (ACA). The pediatric dental requirement can be satisfied with the purchase of one of our certified, stand-alone dental plans. Delta Dental offers the nation’s largest network of dental providers, delivering greater access to care and more cost savings.

## Pediatric Dental Health Benefits

## Kids Plan

	In-Network (IN)	Out-of-Network
<b>Diagnostic/Preventive</b> Routine exams and cleaning twice per calendar year, X-rays, fluoride treatments, sealants	100% (no deductible)	100% (no deductible)
<b>Basic Services</b> Fillings	50%	50%
<b>Endodontics/Periodontics/Oral Surgery</b> Root canals, treatment of gum disease, extractions	50%	50%
<b>Major Services</b> Crowns, dentures, bridges	50%	50%
<b>Medically Necessary Orthodontics</b>	50%	50%
<b>Deductible Per Person/Per Calendar Year</b>	\$50 (does not apply to Diagnostic/Preventive Services)	
<b>Annual Plan Maximum Per Person/Per Calendar Year</b>	N/A	N/A
<b>Annual Out of Pocket Maximum</b>	\$400-1 child \$800-maximum for 2 or more children	N/A
<b>Premium Per Member/Per Month</b> (Maximum 3 child premiums per family*)	<b>\$46.85</b>	

If you have any questions, please contact Delta Dental:  
1-866-764-5350 or visit [DeltaDentalNE.org](http://DeltaDentalNE.org)

IN - In-Network, Delta Dental PPO Plus Premier™

\*Maximum charge for 3 dependents under the age of 21. Dependent children 19 and older will be subject to the applicable adult rate.

Claims received from dentists outside the Delta Dental network are not eligible for network discounts. Members are responsible for paying the difference between Delta Dental of Nebraska’s allowable fee and the fees charged by the non-participating dentist.