

# 2024 Pathfinder Plans

Delta Dental of Minnesota Serving
North Dakota
Delta Dental PPO Plus Premier™



## North Dakota 2024

Delta Dental PPO plus Premier<sup>TM</sup> (2 - 100 Eligible Employees)



	Pathfinder <b>1</b>	Pathfinder <b>2</b>	Pathfinder <b>3</b>	Pathfinder <b>4</b>	Pathfinder <b>5</b>
	1,000	1,000	1,500	1,500	1,500
Employee Only	\$32.57	\$31.77	\$38.29	\$45.30	\$43.50
Employee + Spouse	\$62.49	\$61.02	\$73.54	\$87.03	\$83.58
Employee + Child (ren)	\$76.34	\$74.39	\$89.03	\$103.45	\$106.89
Family	\$119.73	\$115.61	\$138.50	\$161.48	\$164.73
		Deductil	ole		
Annual Deductible: \$50/\$150	•				
Lifetime Deductible: \$100/\$300		•	•	•	•
Preventitive Care Deductible: \$50 Lifetime/Person	•				
		Unique Fea	tures		
Preventative Care Diagnostic & preventative services do not apply to annual max				•	
Child Orthodontic Care					•
Posterior Composite Fillings (white)			•	•	•
Endodontic / Periodontic (80%)				•	•
No Waiting Periods					•
Missing Tooth Clause	•	•	•	•	•
Passive Network	•	•	•	•	•
24 Month Contract			•		
Network Access / Savings	•	•	•	•	•

This is a summary only and does not guarantee coverage, rates or benefits.



Dental coverage is more than just a way to attract and retain employees.



#### Improve productivity:

Each year, more than 92 million work hours are lost due to emergency unplanned dental care.<sup>1</sup>



#### Reduce medical care costs:

Routine dental visits often detect early stages of over 120 other medical conditions.<sup>2</sup>

Benefits that keep your business thriving. Delta Dental offers better service and support to your business and its employees.



**Experience you can trust:** More than 157,000 businesses rely on Delta Dental to protect their employees' oral health, and over 85 million enrollees trust their smiles to Delta Dental.<sup>3</sup>



Access: Delta Dental provides one of the largest nationwide networks.



Network savings: Our network discounts provide extensive savings for employees.



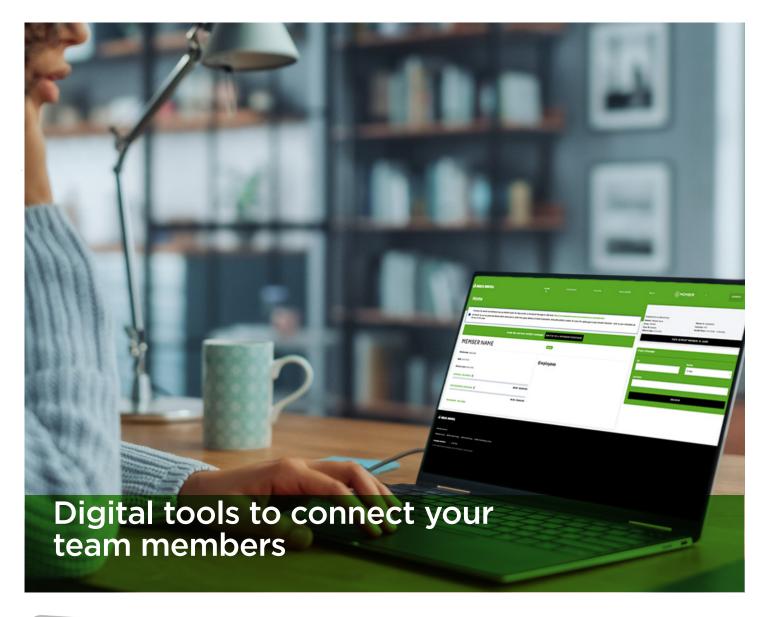
**Technology & Innovation:** We continue to enhance our digital tools and resources through our member portal and member app.



**Service, Support, and Partnership:** We provide world-class customer service, with commitment to member & client satisfaction and to the community.



**Dental Expertise:** We focus on the connection between oral health and overall health. The Power of  $Smile^{TM}$  Blog and oral health resources written by our team of in-house clinicians and experienced service teams provide resources for brokers, employers and members.





## Delta Dental Member Portal

The member portal provides tools for members to self serve and address questions 24/7 via computer, smart phone or tablet.

#### Paperless delivery

In an effort to drive sustainability and ease of use, members have full access to digital ID cards and paperless options for Eligibility of Benefits statements.

## Delta Dental Mobile App

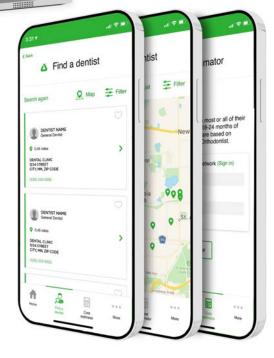
Manage your oral health anytime, anywhere.

We've designed our mobile app to make it easy for your members to make the most of their dental benefits. Search for a dentist near you, view ID cards and more, right on your mobile device.









## Pathfinder 1

## 2-100 Eligible Employees Delta Dental PPO Plus Premier™

**12-Month Contract** 

Service	Description	PPO / Premier / OON
Diagnostic / Preventive Services No Waiting Period	Oral evaluations	100%
	Cleanings - 2 per year	100%
	X-rays	100%
	Fluoride treatments	100%
	Sealants	80%
	Space maintainers	80%
Basic Restorative Services No Waiting Period	Amalgam (silver) fillings	80%
	Anterior composite resin fillings	80%
	Palliative treatment for emergencies	80%
Simple & Complex Oral Surgery	Simple extraction of erupted tooth or exposed root	55%
Vaiting Period - 6 Months	Surgical removal of erupted tooth, impacted tooth and tooth roots	55%
	Pulpal therapy	55%
Endodontic Services Vaiting Period - 12 Months	Root canal therapy	55%
	Pulpotomy	55%
Periodontic Services Waiting Period - 12 Months	Surgical and non surgical periodontic services	55%
Major Restorative Services No Waiting Period	Posterior composite resin fillings	Amalgam Benefit
	Inlays, onlays, crowns and crown repair*	55%
Crowns and Droothatia Comises	Removable prosthetic services-dentures and partials**	55%
Crowns and Prosthetic Services, ncluding Bridges and Dentures	Fixed prosthetic services - bridges**	55%
Waiting Period - 12 Months	Repairs of removable and fixed prosthetic services**	55%
	Implants**	55%
Deductible	<b>Lifetime Deductible - Diagnostic &amp; Preventive Services</b> Per person	\$50
	Annual Deductible - Per person / family	\$50/\$150
Annual Maximum	Per person / per calendar year	\$1,000
Contract Length		12 months

## Pathfinder 1 Rates

Employee	\$32.57
Employee + Spouse	\$62.49
Employee + Child(ren)	\$76.34
Family	\$119.73

OON - Out of Network

PPO / Premier - Delta Dental PPO™, Delta Dental Premier®

- A minimum of two employees must enroll.
- Annual deductible does not apply to diagnostic and preventive services where applicable.

  A 6-month waiting period applies to oral surgery. A 12-month waiting period applies to endodontic, periodontic, crowns, prosthetic repairs and
- prosthetics. See above for plan details.
  For clients that have had at least 12 months of comparable consecutive coverage, all waiting periods are initially waived. The waiver does not apply to employees/dependents who join the client or enroll for coverage after the initial effective date. Posterior (back tooth) composite fillings alternate to the amalgam benefit.
- Annual open enrollment.
- 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 Minnesota's allowable fee and the fees charged by the non-participating dentist.

  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 Dental Benefit Plan Summary.

<sup>\*</sup>Pin post core and crown build up not covered.
\*\*A 24-month missing tooth clause applies to prosthetic services.



## 2-100 Eligible Employees Delta Dental PPO Plus Premier™

12-Month Contract

National Period    Fluoride treatments   100%	Service	Description	PPO / Premier / OON
wilting Period  X-rays  Fluoride treatments  100%  Fluoride treatments  100%  Fluoride treatments  100%  Sealants  Space maintainers  Amalgam (silver) fillings  Anterior composite resin fillings  Simple & Complex Oral Surgery  Aliting Period - 6 Months  Surgical removal of erupted tooth or exposed root  Surgical removal of erupted tooth, impacted tooth and tooth roots  55%  Pulpal therapy  55%  Root canal therapy  55%  Pulpotomy  55%  Root canal therapy  55%  Pulpotomy  55%  Pulpotomy  55%  Pulpotomy  55%  Posterior composite resin fillings  Amalgam Benefit  Inlays, onlays, crowns and crown repair*  55%  Removable prosthetic services or bridges**  Fixed prosthetic services - bridges**  Fixed prosthetic services - bridges**  Repairs of removable and fixed prosthetic services**  Fixed prosthetic services - bridges**  Repairs of removable and fixed prosthetic services*  See Guidelines Below  Per person / per calendar year  \$1,000		Oral evaluations	100%
Fluoride treatments 100%  Fluoride treatments 100%  Sealants 80%  Space maintainers 80%  Amalgam (silver) fillings 80%  Anterior composite resin fillings 80%  Palliative treatment for emergencies 80%  Simple extraction of erupted tooth or exposed root 55%  Surgical removal of erupted tooth, impacted tooth and tooth roots 55%  Pulpal therapy 55%  Pulpotomy 55%  Producting Period - 12 Months 55%  Producting Period - 12 Months 55%  Posterior composite resin fillings 80%  Pulpotomy 55%  Posterior composite resin fillings 65%  Posterior composite resin filling	Diagnostic / Preventive Services No Waiting Period	Cleanings - 2 per year	100%
Sealants 80%  Space maintainers 80%  Amalgam (silver) fillings 80%  Anterior composite resin fillings 80%  Palliative treatment for emergencies 80%  Simple & Complex Oral Surgery (alting Period - 6 Months 2007)  Toggical removal of erupted tooth or exposed root 55%  Surgical removal of erupted tooth, impacted tooth and tooth roots 55%  Pulpal therapy 55%  Root canal therapy 55%  Pulpotomy 55%		X-rays	100%
Space maintainers 80%  Amalgam (silver) fillings 80%  Anterior composite resin fillings 80%  Palliative treatment for emergencies 80%  Simple & Complex Oral Surgery Valting Period - 6 Months Surgical removal of erupted tooth or exposed root 55%  Pulpal therapy 55%  Pulpal therapy 55%  Root canal therapy 55%  Pulpotomy 5		Fluoride treatments	100%
Amalgam (silver) fillings 80% Anterior composite resin fillings 80% Anterior composite resin fillings 80% Palliative treatment for emergencies 80%  Simple & Complex Oral Surgery (aiting Period - 6 Months 2007) Auting Period - 6 Months 2007  Surgical removal of erupted tooth or exposed root 55% Surgical removal of erupted tooth, impacted tooth and tooth roots 55% Pulpal therapy 55% Root canal therapy 55% Pulpotomy 55%  Pulpotomy 55%  Pulpotomy 55%  Pulpotomy 55%  Posterior composite resin fillings 55%  Posterior composite resin fillings 55%  Amalgam Benefit 55%  Inlays, onlays, crowns and crown repair* 55% Removable prosthetic services-dentures and partials** 55% Fixed prosthetic services - bridges** 55%  Repairs of removable and fixed prosthetic services** 55% Implants** 55%  Repairs of removable and fixed prosthetic services** 55%  Implants** 55%  Inlays Deductible - Diagnostic & Preventive Services Ser Guidelines Below Per person   Lifetime Deductible - Per person / family \$100/\$300  Per person   Per person / per calendar year \$1,000		Sealants	80%
Arterior composite resin fillings 80% Palliative treatment for emergencies 80%  Palliative treatment for emergencies 80%  Simple & Complex Oral Surgery Valiting Period - 6 Months  Pulpal therapy 55%  Root canal therapy 55% Pulpotomy 55%  Pulpotomy 55%  Poulpotomy 55%  Poulpotomy 55%  Posterior composite resin fillings 65%  Posterior composite resin fillings 75%  Posterior composite resin fillings 75%  Removable prosthetic services and partials** 55%  Provens and Prosthetic Services 75%  Removable prosthetic services - bridges** 55%  Removable prosthetic services - bridges** 55%  Repairs of removable and fixed prosthetic services** 55%  Implants** 55%  Per person  Lifetime Deductible - Diagnostic & Preventive Services 86  Per person / per calendar year \$1,000		Space maintainers	80%
Palliative treatment for emergencies 80%  Simple & Complex Oral Surgery (Alting Period - 6 Months)  Simple extraction of erupted tooth or exposed root 55%  Surgical removal of erupted tooth, impacted tooth and tooth roots 55%  Pulpal therapy 55%  Root canal therapy 55%  Pulpotomy 55%  Pulpotomy 55%  Pulpotomy 55%  Pulpotomy 55%  Pulpotomy 55%  Posterior composite resin fillings Amalgam Benefit 1 Mays, onlays, crowns and crown repair* 55%  Removable prosthetic services and Dentures (Alting Period - 12 Months)  Prowns and Prosthetic Services (Alting Period - 12 Months)  Posterior composite resin fillings Amalgam Benefit 1 Mays, onlays, crowns and crown repair* 55%  Removable prosthetic services - bridges** 55%  Repairs of removable and fixed prosthetic services** 55%  Implants** 55%  Per person 1 Lifetime Deductible - Diagnostic & Preventive Services Services Services Below 1 Lifetime Deductible - Per person / family \$100/\$300 minual Maximum Per person / per calendar year \$1,000	Basic Restorative Services No Waiting Period	Amalgam (silver) fillings	80%
Simple extraction of erupted tooth or exposed root Surgical removal of erupted tooth, impacted tooth and tooth roots Surgical removal of erupted tooth, impacted tooth and tooth roots Surgical removal of erupted tooth, impacted tooth and tooth roots Surgical removal of erupted tooth, impacted tooth and tooth roots Surgical removal of erupted tooth, impacted tooth and tooth roots Surgical removal of erupted tooth, impacted tooth and tooth roots Surgical removal of erupted tooth, impacted tooth and tooth roots Surgical removal of erupted tooth, impacted tooth and tooth roots Surgical removal of erupted tooth and tooth roots Surgical removal of erupted tooth and tooth roots Surgical removal of erupted tooth, impacted tooth and tooth roots Surgical removal to erupted tooth and tooth roots Surgical removal tooth and tooth and tooth roots Surgical removal tooth and tooth roots Surgical removal tooth and tooth and tooth roots Surgical removal tooth and tooth and tooth roots Surgical removal tooth and t	•	Anterior composite resin fillings	80%
Surgical removal of erupted tooth, impacted tooth and tooth roots   55%		Palliative treatment for emergencies	80%
Pulpal therapy 55%  Root canal therapy 55%  Pulpotomy 55%  Pulpotomy 55%  Pulpotomy 55%  Posterior composite resin fillings Amalgam Benefit  Inlays, onlays, crowns and crown repair* 55%  Removable prosthetic Services, folding Bridges and Dentures faiting Period - 12 Months  Repairs of removable and fixed prosthetic services**  Tixed prosthetic services - bridges**  Repairs of removable and fixed prosthetic services**  Repairs of removable and fixed prosthetic services**  Repairs of removable and fixed prosthetic services**  Per person 55%  Lifetime Deductible - Diagnostic & Preventive Services  Per person / per calendar year \$1,000	Simple & Complex Oral Surgery	Simple extraction of erupted tooth or exposed root	55%
Root canal therapy 55%  Pulpotomy 55%  Posteriod - 12 Months 55%  Posterior composite resin fillings Amalgam Benefit 56 Waiting Period - 12 Months 66 Waiting Period - 12 Months 75%  Removable prosthetic services rockluding Bridges and Dentures 75%  Removable prosthetic services - bridges** 55%  Repairs of removable and fixed prosthetic services** 55%  Repairs of removable and fixed prosthetic services** 55%  Implants** 55%  Posterior composite resin fillings Amalgam Benefit 55%  Removable prosthetic services-dentures and partials** 55%  Repairs of removable and fixed prosthetic services** 55%  Implants** 55%  Per person 55%  Per person 55%  See Guidelines Below 55%  Innual Maximum 9er person / per calendar year \$1,000	Waiting Period - 6 Months	Surgical removal of erupted tooth, impacted tooth and tooth roots	55%
Additing Period - 12 Months Pulpotomy Pulpotomy S5%  Pulpotomy Surgical and non surgical periodontic services Additing Period - 12 Months  Posterior composite resin fillings Amalgam Benefit  Inlays, onlays, crowns and crown repair* Removable prosthetic services-dentures and partials** Fixed prosthetic services - bridges** Repairs of removable and fixed prosthetic services* Implants** S5%  Reductible Lifetime Deductible - Diagnostic & Preventive Services Per person / per calendar year  \$1,000		Pulpal therapy	55%
Posterior composite resin fillings  Amalgam Benefit  Inlays, onlays, crowns and crown repair* Fixed prosthetic Services rolliding Period - 12 Months  Inlays, onlays, crowns and crown repair*  Removable prosthetic services-dentures and partials**  Fixed prosthetic services - bridges**  Repairs of removable and fixed prosthetic services**  Implants**  Inlays, onlays, crowns and crown repair*  Fixed prosthetic services - bridges**  Repairs of removable and fixed prosthetic services**  Implants**  Inlays, onlays, crowns and crown repair*  Fixed prosthetic services - bridges**  Fixed prosthetic services - bridges**  Repairs of removable and fixed prosthetic services**  Implants**  Inlays, onlays, crowns and crown repair*  Fixed prosthetic services - bridges**  Fixed prosthetic services - bridges**  See Guidelines Below  Fixed prosthetic services - bridges**  Inlays, onlays, crowns and crown repair*  Fixed prosthetic services - bridges**  Fixed prosthetic services - bridges**  See Guidelines Below  Inlays, onlays, crowns and crown repair*  Fixed prosthetic services - bridges**  Fixed prosthetic services - bridges**  Fixed prosthetic services - bridges**  See Guidelines Below  Inlays, onlays, crowns and crown repair*  Fixed prosthetic services - bridges**  Fixed prosthetic services - bridges**  Fixed prosthetic services - bridges**  See Guidelines Below  Inlays, onlays, crowns and crown repair*  Fixed prosthetic services - bridges**  Fixed pros	Endodontic Services Waiting Period - 12 Months	Root canal therapy	55%
Surgical and non surgical periodontic services   Shaper		Pulpotomy	55%
Inlays, onlays, crowns and crown repair*  Removable prosthetic services, acluding Bridges and Dentures Vaiting Period - 12 Months  Repairs of removable and fixed prosthetic services**  Implants**  Lifetime Deductible - Diagnostic & Preventive Services Per person  Lifetime Deductible - Per person / family  See Guidelines Below  Per person / per calendar year  \$1,000	Periodontic Services Waiting Period - 12 Months	Surgical and non surgical periodontic services	55%
Removable prosthetic services dentures and partials**  Fixed prosthetic services - bridges**  Repairs of removable and fixed prosthetic services**  Implants**  See Guidelines Below  Lifetime Deductible - Per person / family  Per person / per calendar year  \$1,000	Major Restorative Services No Waiting Period	Posterior composite resin fillings	Amalgam Benefit
Fixed prosthetic services - bridges**  Fixed prosthetic services - bridges**  Repairs of removable and fixed prosthetic services**  Implants**  See Guidelines Below  Lifetime Deductible - Per person / family  See Guidelines Below  Per person / per calendar year  \$1,000		Inlays, onlays, crowns and crown repair*	55%
Fixed prosthetic services - bridges**  Repairs of removable and fixed prosthetic services**  Implants**  Lifetime Deductible - Diagnostic & Preventive Services Per person  Lifetime Deductible - Per person / family  See Guidelines Below  Per person / per calendar year  \$1,000	Cuanna and Duachhabia Camiana	Removable prosthetic services-dentures and partials**	55%
Repairs of removable and fixed prosthetic services** 55%  Implants** 55%  Lifetime Deductible - Diagnostic & Preventive Services Per person	including Bridges and Dentures	Fixed prosthetic services - bridges**	55%
Lifetime Deductible - Diagnostic & Preventive Services Per person  Lifetime Deductible - Per person / family  snnual Maximum  Per person / per calendar year  \$1,000	Waiting Period - 12 Months	Repairs of removable and fixed prosthetic services**	55%
Per person  Lifetime Deductible - Per person / family \$100/\$300  nnual Maximum Per person / per calendar year \$1,000		Implants**	55%
nnual Maximum Per person / per calendar year \$1,000	Deductible		See Guidelines Below
The second secon		Lifetime Deductible - Per person / family	\$100/\$300
contract Length 12 months	Annual Maximum	Per person / per calendar year	\$1,000
	Contract Length		12 months

## Pathfinder 2 Rates

Employee	\$31.77
Employee + Spouse	\$61.02
Employee + Child(ren)	\$74.39
Family	\$115.61

OON - Out of Network

PPO / Premier - Delta Dental PPO™, Delta Dental Premier®

- A minimum of two employees must enroll.
- Lifetime deductible applies to all service, including Diagnostic and Preventive Services.

  A 6-month waiting period applies to oral surgery. A 12-month waiting period applies to endodontic, periodontic, crowns, prosthetic repairs and
- prosthetics. See above for plan details.
  For clients that have had at least 12 months of comparable consecutive coverage, all waiting periods are initially waived. The waiver does not apply to employees/dependents who join the client or enroll for coverage after the initial effective date. Posterior (back tooth) composite fillings alternate to the amalgam benefit.
- Annual open enrollment.
- 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 Minnesota's allowable fee and the fees charged by the non-participating dentist.

  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 Dental Benefit Plan Summary.

<sup>\*</sup>Pin post core and crown build up not covered.
\*\*A 24-month missing tooth clause applies to prosthetic services.



### 2-100 Eligible Employees Delta Dental PPO Plus Premier™

24-Month Contract

Service	Description	PPO / Premier / OON
Diagnostic / Preventive Services No Waiting Period	Oral evaluations	100%
	Cleanings - 2 per year	100%
	X-rays	100%
	Fluoride treatments	100%
	Sealants	80%
	Space maintainers	80%
Basic Restorative Services No Waiting Period	Amalgam (silver) fillings	80%
	Anterior composite resin filling	80%
	Palliative treatment for emergencies	80%
Simple & Complex Oral Surgery	Simple extraction of erupted tooth or exposed root	55%
Waiting Period - 6 Months	Surgical removal of erupted tooth, impacted tooth and tooth roots	55%
	Pulpal therapy	55%
Endodontic Services Waiting Period - 12 Months	Root canal therapy	55%
	Pulpotomy	55%
Periodontic Services Waiting Period - 12 Months	Surgical and non surgical periodontic services	55%
Major Restorative Services No Waiting Period	Posterior composite resin fillings	80%
	Inlays, onlays, crowns and crown repair*	55%
Cuanna and Duaethatia Camiasa	Removable prosthetic services-dentures and partials**	55%
Crowns and Prosthetic Services, including Bridges and Dentures	Fixed prosthetic services - bridges**	55%
Waiting Period - 12 Months	Repairs of removable and fixed prosthetic services**	55%
	Implants**	55%
Deductible	<b>Lifetime Deductible - Diagnostic &amp; Preventive Services</b> Per person	See Guidelines Below
	Lifetime Deductible - Per person / family	\$100/\$300
Annual Maximum	Per person / per calendar year	\$1,500
Contract Length		24 months

## Pathfinder 3 Rates

Employee	\$38.29
Employee + Spouse	\$73.54
Employee + Child(ren)	\$89.03
Family	\$138.50

OON - Out of Network

PPO / Premier - Delta Dental PPO™, Delta Dental Premier®

- A minimum of two employees must enroll.

  Lifetime deductible applies to all services, including Diagnostic and Preventive Services.

  A 6-month waiting period applies to oral surgery. A 12-month waiting period applies to endodontic, periodontic, crowns, prosthetic repairs and prosthetics. See above for plan details.
  For clients that have had at least 12 months of comparable consecutive coverage, all waiting periods are initially waived. The waiver does not apply to
- employees/dependents who join the client or enroll for coverage after the initial effective date.
- Annual open enrollment.

  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 Minnesota's allowable fee and the fees charged by the non-participating dentist.

  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 Dental Benefit Plan Summary.

<sup>\*</sup>Pin post core and crown build up not covered.
\*\*A 24-month missing tooth clause applies to prosthetic services.



## 2-100 Eligible Employees

#### Delta Dental PPO Plus Premier™

12-Month Contract

Service	Description	PPO / Premier / OON
Diagnostic / Preventive Services No Waiting Period Does Not Apply to Annual Maximum	Oral evaluations	100%
	Cleanings - 2 per year	100%
	X-rays	100%
	Fluoride treatments	100%
	Sealants	80%
	Space maintainers	80%
Basic Restorative Services No Waiting Period	Amalgam (silver) fillings	80%
	Anterior composite resin fillings	80%
	Palliative treatment for emergencies	80%
Simple & Complex Oral Surgery	Simple extraction of erupted tooth or exposed root	55%
Waiting Period - 6 Months	Surgical removal of erupted tooth, impacted tooth and tooth roots	55%
	Pulpal therapy	80%
Endodontic Services Waiting Period - 12 Months	Root canal therapy	80%
	Pulpotomy	80%
Periodontic Services Waiting Period - 12 Months	Surgical and non surgical periodontic services	80%
Major Restorative Services No Waiting Period	Posterior composite resin fillings	80%
	Inlays, onlays, crowns and crown repair*	55%
Crowns and Prosthetic Services,	Removable prosthetic services-dentures and partials**	55%
including Bridges and Dentures	Fixed prosthetic services - bridges**	55%
Waiting Period - 12 Months	Repairs of removable and fixed prosthetic services**	55%
	Implants**	55%
Deductible	Lifetime Deductible - Diagnostic & Preventive Services Per person	See Guidelines Below
	Lifetime Deductible - Per person / family	\$100/\$300
Annual Maximum	Per person / per calendar year	\$1,500
Contract Length		12 months

## Pathfinder 4 Rates

Employee	\$45.30
Employee + Spouse	\$87.03
Employee + Child(ren)	\$103.45
Family	\$161.48

OON - Out of Network

PPO / Premier - Delta Dental PPO™, Delta Dental Premier®

- A minimum of two employees must enroll.
- A filmination of two employees indict amounts of the Lifetime deductible applies to all services, including Diagnostic and Preventive Services.

  A 6-month waiting period applies to oral surgery. A 12-month waiting period applies to endodontic, periodontic, crowns, prosthetic repairs and prosthetics. See above for plan details.

  For clients that have had at least 12 months of comparable consecutive coverage, all waiting periods are initially waived. The waiver does not apply to
- employees/dependents who join the client or enroll for coverage after the initial effective date.
- 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 Minnesota's allowable fee and the fees charged by the non-participating dentist.

  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 Dental Benefit Plan Summary.

<sup>\*</sup>Pin post core and crown build up not covered.
\*\*A 24-month missing tooth clause applies to prosthetic services.



## 2-100 Eligible Employees Delta Dental PPO Plus Premier™

**12-Month Contract** 

Service	Description	PPO / Premier / OON
Diagnostic / Preventive Services No Waiting Period	Oral evaluations	100%
	Cleanings - 2 per year	100%
	X-rays	100%
	Fluoride treatments	100%
	Sealants	80%
	Space maintainers	80%
Basic Restorative Services No Waiting Period	Amalgam (silver) fillings	80%
	Anterior composite resin fillings	80%
	Palliative treatment for emergencies	80%
Simple & Complex Oral Surgery	Simple extraction of erupted tooth or exposed root	55%
No Waiting Period	Surgical removal of erupted tooth, impacted tooth and tooth roots	55%
	Pulpal therapy	80%
Endodontic Services No Waiting Period	Root canal therapy	80%
	Pulpotomy	80%
Periodontic Services No Waiting Period	Surgical and non surgical periodontic services	80%
Major Restorative Services No Waiting Period	Posterior composite resin fillings	80%
	Inlays, onlays, crowns and crown repair*	55%
Service and Breadlastic Company	Removable prosthetic services-dentures and partials**	55%
Crowns and Prosthetic Services, ncluding Bridges and Dentures	Fixed prosthetic services - bridges**	55%
No Waiting Period	Repairs of removable and fixed prosthetic services**	55%
	Implants**	55%
Child Orthodontic Coverage	Child orthodontic lifetime maximum	\$1,000
No Waiting Period	Child orthodontic coverage for ages 8 to 19	50%
Deductible	Lifetime Deductible - Diagnostic & Preventive Services Per person	See Guidelines Below
	Lifetime Deductible - Per person / family	\$100/\$300
Annual Maximum	Per person / per calendar year	\$1,500
Contract Length		12 months

## Pathfinder 5 Rates

Employee	\$43.50
Employee + Spouse	\$83.58
Employee + Child(ren)	\$106.89
Family	\$164.73

OON - Out of Network

PPO / Premier - Delta Dental PPO™, Delta Dental Premier $^{\tiny{\$}}$ 

\*Pin post core and crown build up not covered.
\*\*A 24-month missing tooth clause applies to prosthetic services.

- A minimum of two employees must enroll.

  Lifetime deductible applies to all services, including Diagnostic and Preventive Services. It does not apply to Orthodontic Services.
- Annual open enrollment.
- 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 Minnesota's allowable fee and the fees charged by the non-participating dentist.

  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 Dental Benefit Plan Summary.

## Contact Us or Visit Us Online

### DeltaDentalMN.org

#### **Small Business Sales:**

- Renewals, plan changes or plan questions
- Summary plan descriptions
- Proposals and sales assistance

1-800-906-5250

DeltaDentalMN.org/agents

Deltadentalconnect@deltadentalmn.org

## **Large Client Sales:**

- Large client individually rated proposals
- Proposals and sales assistance

Contact Your Sales or Account Representative

### **Individual and Family Dental Plans:**

- Plan descriptions
- Sales & enrollment assistance

1-866-764-5350

DeltaDentalMN.org/shop

Sales@deltadentalmn.org

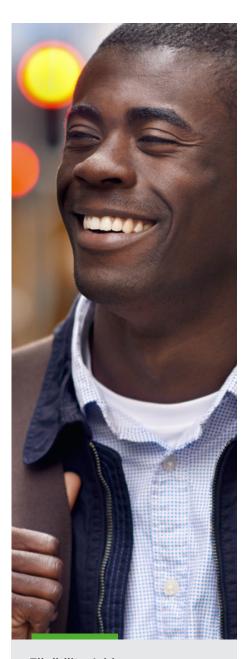
## **Employer Services:**

Additional Resources - Enrollment and Billing

- Employee benefits
- Enrollment
- Claims status
- Billing
- Employer Services Portal

1-866-318-9449

7 a.m.-7 p.m. CST/CDT



## Eligibility Address

Delta Dental of Minnesota Attn: Enrollment Department P.O. Box 30416 Lansing, MI 48909-7916

Eligibility@mydeltadental.com

#### **Corporate Address**

Delta Dental of Minnesota 500 Washington Avenue South Suite 2060 Minneapolis, MN 55415

## Just A Click Away at DeltaDentalMN.org

### **Tools to Assist Your Clients**

- Product brochures
- Forms
- Answers to frequently asked questions deltadentalmn.org/frequently-asked-questions

### The Delta Dental Difference

- Dental expertise
- Superior service
- Largest networks
- Exceptional savings

## DeltaDentalMN.org

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Delta Dental of Minnesota Serving North Dakota

1 US Department of Health and Human Services, Centers of Disease Control and Prevention, Hours Lost to Planned and Unplanned Dental Visits Among US Adults, January 11, 2018; https://www.cdc.gov/pcd/issues/2018/17\_0225.html

2 Delta Dental Plans Association, 2018

3 Delta Dental Plans Association, 2021

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