

Delta Dental of Minnesota

Solutions

Delta Dental PPO Plus Premier™
2021 and 2022 Small Business Plans





Delta Dental Solutions

Give your business the winning edge with Delta Dental Solutions. Whether your business is large, small or in between, we have a plan that's the perfect fit for your employees.

The new 2021 and 2022 Delta Dental Solutions plans have even more options to meet your employees' needs. All plans are built on the value that comes from the nation's largest dental network. These dental benefits are designed to make you the employer of choice.



Solutions 1000

Coverage you need at the best price.

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Solutions 1500

Strong benefits with four cleanings covered per year.

Delta Dental PPO Plus Premier™

Solutions 2000

More robust benefits with orthodontic benefits.

Delta Dental PPO Plus Premier™

Dual Option

More options both in-network and out-of-network.

Delta Dental PPO Plus Premier™

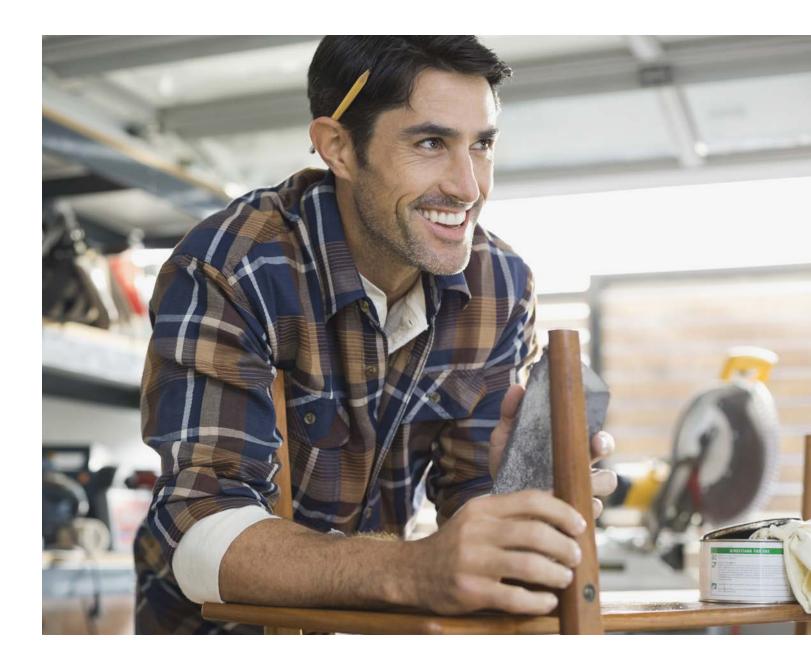
Dual Option + Ortho

All the benefits of Dual Option with orthodontic benefits.

Delta Dental PPO Plus Premier[™]

Dental Flex Options

Robust benefits in all networks with optional orthodontic benefit and annual maximum.



By specializing in dental insurance, Delta Dental offers better service and more support to your business and its employees.



Experience you can trust to meet the needs of your business and employees.

More than 141,000 businesses rely on Delta Dental to protect their employees' oral health, and over 80 million enrollees trust their smiles to Delta Dental.

We consistently have a retention rate higher than 90%.⁵



A large network makes it easy for employees to receive regular care.

More than three out of four dentists nationwide participate in a Delta Dental network.⁵

Benefits that keep your business prosperous



The importance of dental coverage doesn't end with attracting and retaining employees.

A good dental plan also helps:



Improve productivity.

Each year, more than 92 million work hours are lost due to emergency unplanned dental care.² Regular care helps prevent emergencies and the loss of productivity.



Reduce medical care costs.

During a routine dental exam, a dentist may be able to detect the early stages of over 120 medical conditions.

Solutions 1000

2-100 Eligible Employees

Delta Dental Solutions 1000 offers dental coverage at a value price with two cleanings covered per year.



Network(s)

Delta Dental PPO™

Delta Dental Premier®



Cleanings Per Year



Annual Deductible \$50 / \$150



Annual Maximum \$1,000

Solutions 1000

	PPO / Premier	OON
Diagnostic and Preventive Services	100%	100%
Basic Restorative Services	80%	60%
Simple Oral Surgery	80%	60%
Complex Oral Surgery	50%	40%
Endodontic Services	80%	60%
Periodontic Services	80%	60%
Prosthetic Services, Including Bridges and Dentures	50%	40%

OON - Out of Network

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

Solutions 1000

2-100 Eligible Employees Delta Dental PPO Plus Premier™

Service	Description	PPO / Premier	OON
Diagnostic and Preventive Services	Oral evaluations Oral evaluations, X-rays, fluoride treatments, sealants, space maintainers	100%	100%
No Waiting Period	Cleanings Up to 2 per calendar year	100%	100%
Basic Services No Waiting Period	Basic Restorative Services Amalgam (silver) fillings, anterior composite resin fillings, palliative treatment for emergencies, posterior composite resin fillings	80%	60%
Simple Oral Surgery Waiting Period - 6 Months	Simple Oral Surgery Simple extraction of erupted tooth or exposed root	80%	60%
Complex Oral Surgery Waiting Period - 12 Months	Complex Oral Surgery Surgical removal of erupted tooth, impacted tooth & tooth roots	50%	40%
Endodontic & Periodontic Services Waiting Period - 6 Months	Endodontic Services Pulpal therapy, root canal therapy, pulpotomy	80%	60%
	Periodontic Services Surgical and non-surgical periodontic services	80%	60%
	Inlays, Onlays, Crowns and Crown Repairs Core buildup	50%	40%
Crowns and Prosthetic Services, including Bridges and Dentures Waiting Period - 12 Months	Prosthetic Services, including Bridges and Dentures Removable prosthetic services-denture and partial, bridges, repairs of removable & fixed prosthetic services	50%	40%
	Implants	50%	40%
Annual Deductible	Per person / per family Does not apply to Diagnostic & Preventive Services	\$50 / \$1	50
Annual Maximum	Per person / per calendar year	\$1,000)

OON - Out of Network

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

Guidelines for Solutions 1000

- A minimum of two employees must enroll.
- Deductible does not apply to diagnostic and preventive services where applicable.
- A 6-month waiting period applies to simple oral surgery, endodontic, and periodontic services. A 12-month waiting period applies to complex oral surgery, major restorative, 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.

Solutions 1500

2-100 Eligible Employees

Delta Dental Solutions 1500 includes up to four cleanings per calendar year, helping those with at-risk health situations bridge the oral-overall health connection.



Network(s)

Delta Dental PPO™

Delta Dental Premier®



Cleanings Per Year



Annual Deductible \$50 / \$150



Annual Maximum \$1,500

Solutions 1500

	PPO / Premier / OON
Diagnostic and Preventive Services	100%
Basic Restorative Services	80%
Simple Oral Surgery	80%
Complex Oral Surgery	50%
Endodontic Services	80%
Periodontic Services	80%
Prosthetic Services, Including Bridges and Dentures	50%

OON - Out of Network

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

Solutions 1500

2-100 Eligible Employees Delta Dental PPO Plus Premier™

Service	Description	PPO / Premier / OON
Diagnostic and Preventive Services No Waiting Period	Oral evaluations Oral evaluations, X-rays, fluoride treatments, sealants, space maintainers	100%
Does Not Apply to Annual Maximum	Cleanings Up to 4 per calendar year	100%
Basic Services No Waiting Period	Basic Restorative Services Amalgam (silver) fillings, anterior composite resin fillings, palliative treatment for emergencies, posterior composite resin fillings	80%
Simple Oral Surgery Waiting Period - 6 Months	Simple Oral Surgery Simple extraction of erupted tooth or exposed root	80%
Complex Oral Surgery Waiting Period - 12 Months	Complex Oral Surgery Surgical removal of erupted tooth, impacted tooth & tooth roots	50%
Endodontic & Periodontic Services Waiting Period - 6 Months	Endodontic Services Pulpal therapy, root canal therapy, pulpotomy	80%
	Periodontic Services Surgical and non-surgical periodontic services	80%
	Inlays, Onlays, Crowns and Crown Repairs Core buildup	50%
Crowns and Prosthetic Services, including Bridges and Dentures Waiting Period - 12 Months	Prosthetic Services, including Bridges and Dentures Removable prosthetic services-denture and partial, bridges, repairs of removable & fixed prosthetic services	50%
	Implants	50%
Annual Deductible	Per person / per family Does not apply to Diagnostic & Preventive Services	\$50 / \$150
Annual Maximum	Per person / per calendar year	\$1,500

OON - Out of Network

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

Guidelines for Solutions 1500

- A minimum of two employees must enroll.
- Deductible does not apply to diagnostic and preventive services where applicable.
- A 6-month waiting period applies to simple oral surgery, endodontic, and periodontic services. A 12-month waiting period applies to complex oral surgery, major restorative, 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.

Solutions 2000

2-100 Eligible Employees

Delta Dental Solutions 2000 includes the highest annual maximum of \$2000 and child orthodontic coverage.



Network(s)

Delta Dental PPO™

Delta Dental Premier®



Cleanings Per Year



Annual Deductible \$50 / \$150



Annual Maximum **\$2,000**



Child Orthodontic Coverage

Solutions 2000

	PPO	Premier	OON
Diagnostic and Preventive Services	100%	100%	100%
Basic Restorative Services	85%	80%	65%
Simple Oral Surgery	85%	80%	65%
Complex Oral Surgery	60%	50%	40%
Endodontic Services	85%	80%	65%
Periodontic Services	85%	80%	65%
Prosthetic Services, Including Bridges and Dentures	60%	50%	40%
Child Orthodontic Coverage		\$2,000 / 50%	

Solutions 2000

2-100 Eligible Employees Delta Dental PPO Plus Premier™

Service	Description	PPO	Premier	OON	
Diagnostic and Preventive Services	Oral evaluations Oral evaluations, X-rays, fluoride treatments, sealants, space maintainers	100%	100%	100%	
No Waiting Period	Cleanings Up to 2 per calendar year	100%	100%	100%	
Basic Services No Waiting Period	Basic Restorative Services Amalgam (silver) fillings, anterior composite resin fillings, palliative treatment for emergencies, posterior composite resin fillings	85%	80%	65%	
Simple Oral Surgery No Waiting Period	Simple Oral Surgery Simple extraction of erupted tooth or exposed root	85%	80%	65%	
Complex Oral Surgery Waiting Period - 12 Months	Complex Oral Surgery Surgical removal of erupted tooth, impacted tooth & tooth roots	60%	50%	40%	
Endodontic & Periodontic Services No Waiting Period	Endodontic Services Pulpal therapy, root canal therapy, pulpotomy	85%	80%	65%	
	Periodontic Services Surgical and non-surgical periodontic services	85%	80%	65%	
Crowns and Prosthetic Services, including Bridges and Dentures Waiting Period - 12 Months	Inlays, Onlays, Crowns and Crown Repairs Core buildup	60%	50%	40%	
	Prosthetic Services, including Bridges and Dentures Removable prosthetic services-denture and partial, bridges, repairs of removable & fixed prosthetic services	60%	50%	40%	
	Implants	60%	50%	40%	
Child Orthodontic Coverage	Lifetime maximum		\$2,000		
Waiting Period - 12 Months	Orthodontic coverage for ages 8 to 19		50%		
Annual Deductible	Per person / per family Does not apply to Diagnostic & Preventive Services	\$50 / \$150)	
Annual Maximum	Per person / per calendar year		\$2,000		

OON - Out of Network

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

Guidelines for Solutions 2000

- A minimum of two employees must enroll.
- Deductible does not apply to diagnostic and preventive services or orthodontic services where applicable.
- A 12-month waiting period applies to complex oral surgery, major restorative, prosthetic repairs, prosthetics and orthodontic services. 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.

Solutions **Dual Option**

2-100 Eligible Employees

Formerly Millennium Choice

The Solutions Dual Option plan is all about flexibility, giving employees the ability to choose between two robust plan options to fit their needs depending on whether they see a Delta Dental PPO™ or Delta Dental Premier® dentist. All plan options provide comprehensive coverage.



Delta Dental PPO™ **Delta Dental Premier®**





Annual Deductible \$25 / \$75



\$2,000 / \$1,000

Solutions Dual Option

	Ор	Option 2	
	PPO	Premier / OON	Premier / OON
Diagnostic and Preventive Services	100%	80%	100%
Basic Restorative Services	90%	50%	80%
Simple Oral Surgery	100%	50%	80%
Complex Oral Surgery	80%	80%	80%
Endodontic Services	80%	50%	50%
Periodontic Services	80%	50%	50%
Prosthetic Services, Including Bridges and Dentures	50%	50%	50%

2021 and 2022 Delta Dental of Minnesota Dental Plans for All Employers

Solutions **Dual Option**

Formerly Millennium Choice

2-100 Eligible Employees Delta Dental PPO Plus Premier™

		Option 1		Option 2
Service	Description	PPO	Premier/ OON	Premier/ OON
	Oral evaluations Oral evaluations, X-rays, fluoride treatments	100%	80%	100%
Diagnostic and Preventive Services No Waiting Period	Cleanings Up to 2 per calendar year	100%	80%	100%
	Space Maintainers	100%	80%	100%
Basic Services No Waiting Period	Basic Restorative Services Amalgam (silver) fillings, anterior composite resin fillings, palliative treatment for emergencies, sealants	90%	50%	80%
	Posterior Composite Resin Fillings	50%	50%	50%
Simple Oral Surgery No Waiting Period	Simple Oral Surgery Simple extraction of erupted tooth or exposed root	100%	50%	80%
Complex Oral Surgery No Waiting Period	Complex Oral Surgery Surgical removal of erupted tooth, impacted tooth & tooth roots	80%	80%	80%
Endodontic & Periodontic Services	Endodontic Services Pulpal therapy, root canal therapy, pulpotomy	80%	50%	50%
No Waiting Period	Periodontic Services Surgical and non-surgical periodontic services	80%	50%	50%
	Inlays, Onlays, Crowns and Crown Repairs Core buildup	50%	50%	50%
Crowns and Prosthetic Services, including Bridges and Dentures No Waiting Period	Prosthetic Services, including Bridges and Dentures Removable prosthetic services-denture and partial, bridges, repairs of removable & fixed prosthetic services	50%	50%	50%
	Implants	50%	50%	50%
Annual Deductible	Per person / per family Does not apply to Diagnostic & Preventive Services	\$0	\$25/\$75	\$25/\$75
Annual Maximum	Per person / per calendar year	\$2,000	\$2,000	\$1,000

OON - Out of Network

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

Guidelines for Solutions Dual Option

- A minimum of two employees must enroll.
- Deductible does not apply to diagnostic and preventive services or orthodontic services where applicable.
- 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.

Solutions **Dual Option Plus Ortho**

2-100 Eligible Employees

Formerly Millennium Choice

The Solutions Dual Option Plus Ortho plan is all about flexibility, giving employees the ability to choose between two robust plan options to fit their needs depending on whether they see a Delta Dental PPO^{TM} or Delta Dental Premier* dentist. All plan options provide comprehensive coverage with optional child orthodontic coverage.



Network(s) Delta Dental PPO™ Delta Dental Premier®



Cleanings Per Year



Annual Deductible \$25 / \$75



Annual Maximum **\$2,000 / \$1,000**



Child Orthodontic Coverage
Voc

Solutions Dual Option Plus Ortho	Ор	Option 2	
	PPO	Premier / OON	Premier / OON
Diagnostic and Preventive Services	100%	80%	100%
Basic Restorative Services	90%	50%	80%
Simple Oral Surgery	100%	50%	80%
Complex Oral Surgery	80%	80%	80%
Endodontic Services	80%	50%	50%
Periodontic Services	80%	50%	50%
Prosthetic Services, Including Bridges and Dentures	50%	50%	50%
Child Orthodontic Coverage		\$1,000 / 50%	

Solutions **Dual Option + Ortho**

Formerly Millennium Choice

2-100 Eligible Employees Delta Dental PPO Plus Premier™

		Option 1		Option 2
Service	Description	PPO	Premier/ OON	Premier/ OON
Dia un actica and	Oral evaluations Oral evaluations, X-rays, fluoride treatments	100%	80%	100%
Diagnostic and Preventive Services No Waiting Period	Cleanings Up to 2 per calendar year	100%	80%	100%
	Space Maintainers	100%	80%	100%
Basic Services No Waiting Period	Basic Restorative Services Amalgam (silver) fillings, anterior composite resin fillings, palliative treatment for emergencies, sealants	90%	50%	80%
	Posterior Composite Resin Fillings	50%	50%	50%
Simple Oral Surgery No Waiting Period	Simple Oral Surgery Simple extraction of erupted tooth or exposed root	100%	50%	80%
Complex Oral Surgery No Waiting Period	Complex Oral Surgery Surgical removal of erupted tooth, impacted tooth & tooth roots	80%	80%	80%
Endodontic & Periodontic	Endodontic Services Pulpal therapy, root canal therapy, pulpotomy	80%	50%	50%
Services No Waiting Period	Periodontic Services Surgical and non-surgical periodontic services	80%	50%	50%
	Inlays, Onlays, Crowns and Crown Repairs Core buildup	50%	50%	50%
Crowns and Prosthetic Services, including Bridges and Dentures No Waiting Period	Prosthetic Services, including Bridges and Dentures Removable prosthetic services-denture and partial, bridges, repairs of removable & fixed prosthetic services	50%	50%	50%
	Implants	50%	50%	50%
Child Orthodontic Coverage	Lifetime maximum	\$1,000	\$1,000	\$1,000
No Waiting Period	Orthodontic coverage for ages 8 to 19	50%	50%	50%
Annual Deductible	Per person / per family Does not apply to Diagnostic & Preventive Services	\$0	\$25/\$75	\$25/\$75
Annual Maximum	Per person / per calendar year	\$2,000	\$2,000	\$1,000

OON - Out of Network

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

Guidelines for Solutions Dual Option Plus Ortho

- A minimum of two employees must enroll.
- Deductible does not apply to diagnostic and preventive services or orthodontic services where applicable.
- 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.

Dental Flex Options

2+ Eligible Employees

Dental Flex gives businesses throughout Minnesota the flexibility to offer employees a comprehensive dental plan while controlling costs through our extensive Delta Dental PPO Plus Premier™ network, waiting periods, deductibles and annual maximum options. Only two employees need to enroll. Optional child orthodontic coverage is available with a \$1000 lifetime maximum, and employers have the ability to choose either a \$1000 or \$1500 annual maximum.



Network(s)

Delta Dental PPO™

Delta Dental Premier®



Cleanings Per Year



Annual Deductible \$50 / \$150



Annual Maximum **\$1,000** or **\$1,500**



Child Orthodontic Coverage

Dental Flex

	PPO	Premier / OON
Diagnostic and Preventive Services	100%	80%
Basic Restorative Services	80%	50%
Simple Oral Surgery	50%	50%
Complex Oral Surgery	50%	50%
Endodontic Services	50%	50%
Periodontic Services	50%	50%
Prosthetic Services, Including Bridges and Dentures	50%	50%
Optional Child Orthodontic Coverage	\$1,000 / 50%	

Dental Flex Options

2+ Eligible Employees Delta Dental PPO Plus Premier™

Service	Description	PPO	Premier / OON
Diagnostic and Preventive Services	Oral evaluations Oral evaluations, X-rays, fluoride treatments	100%	80%
No Waiting Period	Cleanings Up to 2 per calendar year	100%	80%
Basic Services No Waiting Period	Basic Restorative Services Amalgam (silver) fillings, anterior composite resin fillings, palliative treatment for emergencies, sealants, space maintainers	80%	50%
	Posterior Composite Resin Fillings	Amalga	am Benefit
Simple Oral Surgery Waiting Period - 6 Months	Simple Oral Surgery Simple extraction of erupted tooth or exposed root	50%	50%
Complex Oral Surgery Waiting Period - 6 Months	Complex Oral Surgery Surgical removal of erupted tooth, impacted tooth & tooth roots	50%	50%
Endodontic & Periodontic Services Waiting Period - 6 Months	Endodontic Services Pulpal therapy, root canal therapy, pulpotomy	50%	50%
	Periodontic Services Surgical and non-surgical periodontic services	50%	50%
Crowns and Prosthetic	Inlays, Onlays, Crowns and Crown Repairs	50%	50%
Services, including Bridges and Dentures Waiting Period - 12 Months	Prosthetic Services, including Bridges and Dentures** Removable prosthetic services-denture and partial, bridges, repairs of removable & fixed prosthetic services	50%	50%
Optional Child Orthodontic Lifetime maximum		\$1,000	
Coverage Waiting Period - 12 Months	Optional orthodontic coverage for ages 8 to 19	50%	
Annual Deductible	Per person / per family Does not apply to Diagnostic & Preventive Services	\$50 / \$150	
Annual Maximum	Per person / per calendar year	\$1,000 or \$1,500	

OON - Out of Network

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

Guidelines for Dental Flex

- A minimum of two employees must enroll.
- Deductible does not apply to diagnostic and preventive services or orthodontic services where applicable.
- A 6-month waiting period applies to simple and complex oral surgery, endodontic and periodontic services. A 12-month waiting period applies to major restorative, prosthetic repairs, prosthetics and orthodontic services. See above for plan details.
- Posterior (back tooth) composite fillings alternate to the amalgam benefit.
- 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.

^{** 24-}month missing tooth clause applies to prosthetic services.

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

500 Washington Avenue South Suite 2060 Minneapolis, MN 55415



Delta Dental of Minnesota

- $1\, The \, Most \, Desirable \, Employee \, Benefits, \, \textit{Harvard Business Review}; \, \underline{https://hbr.org/2017/02/the-most-desirable-employee-benefits}.$
- 2 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
- 3 Fall 2016 Study-Newsworthy Analysis, Delta Dental Plans Association, 10/30/16
- $4 \ \mathsf{Top} \ \mathsf{5} \ \mathsf{Most} \ \mathsf{Desirable} \ \mathsf{Employee} \ \mathsf{Benefits}, \ \mathsf{HR} \ \mathsf{Gazette}; \\ \underline{\mathsf{https://hr-gazette.com/top-5-desirable-employee-benefits/}}$
- 5 Delta Dental Plans Association, 2018

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. © 2022 Delta Dental of Minnesota and its affiliates. All rights reserved. Delta Dental of Minnesota is an authorized licensee of the Delta Dental Plans Association of Oak Brook, Illinois.