

Delta Dental of Minnesota Serving North Dakota 2026 Medica Dental Plans



The Delta Dental Difference

- Best-in-class customer service
- Ability to pair medical and dental benefits
- Coverage options to fit your needs



Extensive dental networks

Delta Dental PPO™ Plus Premier®

Delta Dental Premier®: 246

Delta Dental PPO™: 89

Medica Dental Plans:

2-100 Eligible Employees

2-100 Eligible Employees		Plan 1		Plan 2		Plan 3	
Deductible Per person / per family (calendar year)		\$50/\$150		\$50/\$150		\$25/\$75	
Annual Maximum		\$750		\$1,000		\$1,500	
Covered Services							
Diagnostic and Preventive Services		100%		100%		100%	
Basic Restorative Services		80%		80%		80%	
Endodontic Services*		N/A		50%		80%	
Periodontic Services*		N/A		50%		80%	
Simple and Complex Oral Surgery*		N/A		50%		80%	
Implants*		N/A		50%		50%	
Inlays, Onlays, Crowns and Crown Repair*		N/A		50%		50%	
Prosthetic Services, including Bridges & Dentures*		N/A		50%		50%	
Orthodontics Optional* Available to all members ages 8 to 19		N/A		50% \$1,000 Lifetime max		50% \$1,000 Lifetime max	
Rates Rates guaranteed for 12 months after issue.		Plan 1		Plan 2		Plan 3	
		Without Ortho	With Ortho	Without Ortho	With Ortho	Without Ortho	With Ortho
Employee		\$20.85	N/A	\$31.43	\$31.43	\$37.69	\$37.69
Employee + Spouse		\$39.54	N/A	\$60.10	\$60.10	\$72.17	\$72.17
Employee + Child(ren)		\$57.49	N/A	\$73.91	\$80.87	\$88.06	\$95.03
Family - Employee, Spouse, child(ren)		\$87.59	N/A	\$115.66	\$124.57	\$137.31	\$146.22

* 12 month waiting period applies to: endodontic, periodontic, oral surgery, implants, inlays, onlays, crowns, crown repair, prosthetic services and orthodontic services.

- No waiting period for diagnostic, preventive and basic restorative services.
- Waiting periods may be waived with prior, comparable dental insurance coverage. Some restrictions apply.
- Diagnostic and preventive services do apply to the annual maximum.
- This is a summary of benefits only. For a complete list of covered services, limitations and exclusions, please refer to the Dental Plan Details.

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