



Keep Smiling Delta Dental PPO™



Save with PPO

Visit a dentist in the PPO¹ network to maximize your savings.² These dentists have agreed to reduced fees, and you won't get charged more than your expected share of the bill.³ Find a PPO dentist at **deltadentalins.com**.

Set up an online account

Get information about your plan, check benefits and eligibility information, find a network dentist and more. Sign up for an online account at **deltadentalins.com**.

Check in without an ID card

You don't need a Delta Dental ID card when you visit the dentist. Just provide your name, birth date and enrollee ID or Social Security number. If your family members are covered under your plan, they'll need your information. Prefer to have an ID card? Simply log in to your account to view or print your card.

Save with a PPO dentist





Coordinate dual coverage

If you're covered under two plans, ask your dental office to include information about both plans with your claim — we'll handle the rest.

Understand transition of care

Generally, multi-stage procedures are covered under your current plan only if treatment began after your plan's effective date of coverage.⁴ Log in to your online account to find this date.

Get LASIK and hearing aid discounts

With access to QualSight and Amplifon Hearing Health Care⁵, you can save as much as 50% on LASIK procedures and more than 60% on hearing aids. To take advantage of these discounts, call QualSight at 855-248-2020 and Amplifon at 888-779-1429.

Got more questions?

Visit deltadentalins.com/neisd to see the answers to frequently asked questions.

¹ In Texas, Delta Dental Insurance Company provides a dental provider organization (DPO) plan.

² You can still visit any licensed dentist, but your out-of-pocket costs may be higher if you choose a non-PPO dentist. Network dentists are paid contracted fees.

³ You are responsible for any applicable deductibles, coinsurance, amounts over annual or lifetime maximums and charges for non-covered services. Out-of-network dentists may bill the difference between their usual fee and Delta Dental's maximum contract allowance.

⁴ Applies only to procedures covered under your plan. If you began treatment prior to your effective date of coverage, you or your prior carrier is responsible for any costs. Group- and state-specific exceptions may apply. If you are currently undergoing active orthodontic treatment, you may be eligible to continue treatment under Delta Dental PPO. Review your Evidence of Coverage, Summary Plan Description or Group Dental Service Contract for specific details about your plan.

⁵ Vision corrective services and Amplifon's hearing health care services are not insured benefits. Delta Dental makes the vision corrective services program and hearing health care services program available to you to provide access to the preferred pricing for LASIK surgery and for hearing aids and other hearing health services.

Benefit Highlights Delta Dental PPO™



For: North East Independent School District (High Plan)

Group number: 17959

Eligibility	Primary enrollee, spouse and eligible dependent children to the end of the month dependent turns age 26			
Deductibles	\$50 per person / \$150 per family each calendar year Yes			
Deductibles waived for Diagnostic & preventive (D&P)?				
Maximums	Delta Dental PPO and Delta Dental Premier® dentists: \$1,750 per person each calendar year Non-Delta Dental dentists: \$1,500 per person each calendar year			
D&P counts toward maximum?	Yes			
Waiting periods	Basic benefits None	Major benefits 12 Months	Prosthodontics 12 Months	Orthodontics 12 Months

Benefits and covered services*	Delta Dental PPO and Delta Dental Premier dentists**	Non-Delta Dental dentists**	
Diagnostic & preventive services (D&P) Exams, cleanings and x-rays and sealants	100%	100%	
Basic benefits Fillings	80%	65%	
Endodontics (root canals) Covered under basic services	80%	65%	
Periodontics (gum treatment) Covered under basic services	80%	65%	
Oral surgery Covered under basic services	80%	65%	
Major services Crowns, inlays, onlays and cast restorations	50%	40%	
Prosthodontics Bridges, dentures and implants	50%	40%	
Orthodontics (quarterly payments) Adults and children	50%	50%	
Orthodontic maximums and deductibles	\$2,000 lifetime maximum \$1,000 annual maximum \$50 deductible	\$2,000 lifetime maximum \$1,000 annual maximum \$50 deductible	

^{*} Limitations or waiting periods may apply for some benefits; some services may be excluded from your plan. Payment is based on maximum plan allowances and not necessarily each dentist's actual fees.

NEISD Employee Benefits Office 210-407-0187 eb@neisd.net **Delta Dental Customer Service** 800-521-2651

Delta Dental Claims Address P.O. Box 1809 Alpharetta, GA 30023-1809

deltadentalins.com/neisd

This benefit information is not intended or designed to replace or serve as the plan's Evidence of Coverage or Summary Plan Description. If you have specific questions regarding the benefits, limitations or exclusions for your plan, please consult your company's benefits representative.

Delta Dental PPO™ is underwritten by Delta Dental Insurance Company in AL, DC, FL, GA, LA, MS, MT, NV and UT and by not-for-profit dental service companies in these states: CA - Delta Dental of California; PA, MD - Delta Dental of Pennsylvania; NY - Delta Dental of New York, Inc.; DE - Delta Dental of Delaware, Inc.; WV - Delta Dental of West Virginia, Inc. In Texas, Delta Dental Insurance Company provides a dental provider organization (DPO) plan. Delta Dental is a registered mark of Delta Dental Plans Association.

^{**} Payment is based on PPO fees for PPO dentists, Premier fees for Premier dentists and maximum plan allowance fees for non-Delta Dental dentists.