

Northeast Delta Dental Plan Summary

Annual Maximum	\$1,500 per person/year
Deductible	Individual: \$50 Family: \$150
Preventive Services	You pay 0% (deductible waived) Plan pays 100%
Basic Services	You pay 20%* Plan pays 80% *After deductible
Major Services	You pay 50%* Plan pays 50% *After deductible
Orthodontia Services	No deductible Plan pays 50% Lifetime maximum benefit \$1500 per person Coverage is for adults and children
Are you required to use network providers?	Participants can see any provider, but there is cost savings when using an in-network provider