

<h2>Buy-up Plan 1</h2>	In-Network	Out-of-Network
	If a Delta Dental PPO™ or a Delta Dental Premier® Dentist is Used	If a Non-Participating Dentist is Used
Preventive & Diagnostic Services		
Exams (2x per Plan Year)	100%	100%
Cleanings (2x per Plan Year, 4x if in Active Periodontal Therapy)	100%	100%
Bitewing X-Rays, Full Mouth X-Rays, Periapical X-Rays	100%	100%
Intraoral X-Rays, Specialty Consultations, Fluoride Treatments	100%	100%
Sealants, Space Maintainers	100%	100%
Basic Services		
Fillings (<i>Composite fillings on all teeth</i>)	80%	80%
Simple Extractions, Root Canals (Endodontics)	80%	80%
Oral Surgery Excluding Impacted Extractions	80%	80%
Non-Surgical Periodontics (includes Periodontal Maintenance)	80%	80%
Denture Repair, Occlusal Guards	80%	80%
Prefabricated Stainless Steel & Resin Crowns		
Major Services		
Non-Prefabricated Crowns & Gold Restorations	50%	50%
Bridgework, Full & Partial Dentures	50%	50%
Implants, Prosthesis over Implant, Impacted Extractions	50%	50%
Surgical Periodontics	50%	50%
Plan Year Maximum (per person)	\$ 1,500	\$ 1,500
*Preventive & Diagnostic Services do not apply to Plan Year Maximum		
Plan Year Deductible		
Per Person	\$50	\$50
Family Maximum	\$150	\$150
Waived for	Preventive & Diagnostic	Preventive & Diagnostic

Dependents are covered to age 26.

There are not separate plan year maximums and deductibles for each type of dentist. The plan year maximums & deductibles cross-accumulate among Delta Dental PPO, Delta Dental Premier and non-participating dentists.

Delta Dental's Special Health Care benefit allows for enhanced benefits for members (adults & children) with special health care needs. Additional dental exams and/or consultations; up to four total dental cleanings in a benefit year and medically necessary treatment delivery modifications (including anesthesia and nitrous oxide) for patients with sensory sensitivities, behavioral challenges, severe anxiety, or other barriers. Members with a qualifying special health care need should advise their dentist that their group plan now offers this enhancement. Your dentist will then verify the additional benefits with Delta Dental.

Carryover Max™ is easy and automatic. To qualify for COM, you must:

- Receive at least one cleaning or one oral exam during the plan year. If you don't receive a cleaning or exam, you won't be eligible to carry over any of your benefit dollars to the following year.
- A covered person is eligible for the Carryover MaxSM benefit if less than half of the standard annual maximum is used in the prior benefit year.
- Carryover Max allows you to carry over up to 25% of the unused portion of your standard annual maximum up to a maximum of \$500.
- The accumulated amount can never exceed your standard annual maximum.
- Standard annual maximum dollars are used first. Carryover Max dollars are used after the standard annual maximum is met.

Delta Dental's *Oral Health Enhancement Option* enables you to receive up to four dental cleanings and/or periodontal maintenance procedures in any combination per benefit period if you have been treated for periodontal (gum) disease in the past. For the additional dental cleaning and/or periodontal maintenance procedures to be covered, you must have had periodontal surgery or periodontal scaling and planing in the past. Details on how to qualify can be found in your benefit booklet. In addition, members with defined medical conditions such as Diabetes, Cardiovascular Disease, Pregnancy or are undergoing certain Cancer treatments may qualify for up to two additional cleanings when certified by a physician or dentist.

Over 300,000 participating dental offices nationwide participate with the national Delta Dental system, although you may choose any fully licensed dentist to render necessary services. Participating dentists will be paid directly by Delta Dental to the extent that services are covered by the contract. Non-participating dentists will bill the patient directly, and Delta Dental will make payment directly to the member. **Maximum benefit may be derived by utilizing the services of a participating dentist.**

Where the eligible patient is treated by a Delta Dental PPOSM dentist, the fee for the covered service(s) will not exceed the Delta Dental PPO maximum allowable charge(s). Where the eligible patient is treated by a Delta Dental Premier[®] dentist who does not participate in Delta Dental PPO or by a *Participating Specialist*, the dentist has agreed not to charge eligible patients more than the dentist's filed fee or Delta Dental's established maximum plan allowance, and Delta Dental will pay such dentists based on the least of the actual fee, the filed fee, or Delta Dental's established maximum plan allowance for the procedure(s). Claims for services provided by dentists who are neither Delta Dental Premier, Delta Dental PPO dentists, or *Participating Specialists* are paid based on the lesser of the dentist's actual charge or the prevailing fee. Members utilizing non-participating dentists may be billed for the difference between the dentist's charge and Delta Dental's allowable charge. Visit www.deltadentalnj.com for a directory of participating dentists.

During your FIRST appointment, tell your dentist that you are covered under this program. Give him/her your Group's name, its Delta Dental Group Number and your Member ID number. If you have any questions regarding your benefits, you may contact our Customer Service Department Monday through Thursday, 8:00 a.m. to 6:30 p.m. EST and Friday, 8:00 a.m. to 5:00 p.m. EST, at 1-877-305-9485.

This overview contains a general description of your dental care program for your use as a convenient reference. Complete details of your program appear in the group contract between your plan sponsor and Delta Dental of New Jersey, Inc. which governs the benefits and operation of your program. In CT, Delta Dental of Connecticut writes dental coverage on an insured basis and Delta Dental of New Jersey administers self-funded dental benefit programs. The group contract would control if there should be any inconsistency or difference between its provisions and the information in this overview.

Everyone Deserves a Healthy Smile



Thank you for choosing Delta Dental of New Jersey!

Check out these helpful tips to navigate the easy-to-use online member tools on our website.

MySmile®

Find tools that make navigating your Delta Dental benefits simple and secure. Plan members can create their account with or without an ID number.

Find a Dentist

Locate a dentist near where you work or live at DeltaDentalNJ.com/FAD.

View and Print ID Cards

Log in to MySmile® and download your ID card from your dashboard.

Dental Care Cost Estimator

Find cost ranges for common dental care needs.

Dental Central

Read articles on the connection between a healthy smile and overall well-being. Check out [grin! magazine](#), too!

There are two easy ways to register on MySmile®—from your computer or from your smartphone.

- 1 Visit DeltaDentalNJ.com/MySmile and click “Register.”
- 2 Choose if you’re a subscriber or dependent, and select “Continue” at the bottom of the page.
- 3 Register using either your street address or member ID, and select “Continue.”
- 4 Create a user name and password when prompted. Read and check the box to “Agree to Terms of Use” for our website. Click “Continue.” and you should receive a verification code within five minutes, but no longer than 24 hours.
- 5 Enter the code, and click “Continue.”
- 6 You now will be able to print an ID card and access your account using your newly created username and password!



Questions about your benefits or need help with online tools? Call **800-452-9310**.