



Group #04388

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|--|----------------|--------------|
| | Actives | COBRA |
| Full Rider A | ▪ 10001 | ▪ 11001 |
| Flex Dental | ▪ 10002 | ▪ 11002 |
| <ul style="list-style-type: none"> ▪ 100 Teachers ▪ 200 Administrators ▪ 300 AFSCME ▪ 400 Central Office ▪ 500 Custodians ▪ 700 Support Staff ▪ 800 ABA Job Coaches | | |

DENTAL ENROLLMENT FORM

Name of Employer

Effective Date of Coverage

Regional School District #13

GENERAL INFORMATION - THIS SECTION MUST BE COMPLETED - PLEASE PRINT CLEARLY

Name (Last)	(First)	(Middle)	Date of Birth ____/____/____	Social Security Number ____-____-____
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Street Address	City, State, Zip	County
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Date of Employment ____/____/____	Type of Coverage <input type="checkbox"/> Single <input type="checkbox"/> Parent/Child <input type="checkbox"/> Husband/Wife <input type="checkbox"/> Parent/Children <input type="checkbox"/> Family	Marital Status <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced/Separated	Home Telephone () _____
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Enrollment	First Name - Last Name	Social Security Number	Date of Birth	Full-Time Student
Subscriber		____-____-____	/ /	
Spouse*			/ /	
Dependent			/ /	<input type="checkbox"/> Yes <input type="checkbox"/> No
Dependent			/ /	<input type="checkbox"/> Yes <input type="checkbox"/> No
Dependent			/ /	<input type="checkbox"/> Yes <input type="checkbox"/> No
Dependent			/ /	<input type="checkbox"/> Yes <input type="checkbox"/> No

* If spouse has other dental coverage, please list name and address of employer and other carrier:

I hereby represent that all information furnished is true and complete to the best of my knowledge and authorize my employer to make any required deduction from my wages.

Subscriber Signature

Date

Delta Use Only

Entered

Operator #



Regional School District #13
 Group #04388
 Delta Dental PPO Plus Premier™

Flex Dental	In-Network		Out-of-Network
	If a Delta Dental PPO™ Dentist is Used	If a Delta Dental Premier® is Used	If a Non-Participating Dentist is Used
Preventive & Diagnostic Exams Cleanings Bitewing X-Rays Fluoride Treatments (Frequency limitations apply) Space Maintainers	100%	100%	100%
Basic Fillings Simple Extractions Root Canals (Endodontics) Periodontics Oral Surgery Repair of Dentures	80%	80%	80%
Major Crowns & Gold Restorations Periodontics Bridgework Full & Partial Dentures	50%	50%	50%
Annual Maximum (per person)	\$ 2,000	\$ 2,000	\$ 2,000
Annual Deductible Per Person Family Maximum Waived for	\$25 \$75 Preventive & Diagnostic	\$25 \$75 Preventive & Diagnostic	\$25 \$75 Preventive & Diagnostic
Orthodontics Children Only to age 19 Lifetime Maximum	50% \$ 1,000	50% \$ 1,000	50% \$ 1,000

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.

Visit your own dentist. If you do not have a dentist, there is a directory available with your plan administrator listing participating dentists. You may call 1-800-DELTA-OK and a list of participating dentists located in your area will be mailed directly to your home, or you may access our Website at www.deltadentalnj.com.

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 1-800-452-9310.

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. 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. Our goal is to provide you and your covered dependents with the highest quality dental benefit program. We are committed to helping you improve your oral health while providing access to the nation's largest network of dental providers.

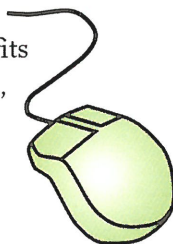


Convenience That Counts

Benefits Connection. Your online resource for accessing real-time plan information and more.

To access "Benefits Connection" go to: www.deltadentalnj.com and log onto "Benefits Connection." Once registered and logged in, you will be able to:

- ▶ Review your eligibility, claims history and status
- ▶ Browse our Oral Health Library
- ▶ Receive answers to your benefits-related questions
- ▶ Print ID cards
- ▶ Sign up for *Member News*, a free electronic monthly newsletter



Extensive Choice of Providers

Finding a Dentist. You can find a participating dentist two ways:

- ▶ **Website.** Using the Find a Dentist search feature at www.deltadentalnj.com.
- ▶ **Telephone.** Call toll free 1-800-DELTA-OK (1-800-335-8265) and a list of participating dentists located in your area can be emailed, faxed, or mailed directly to you.



Save some green on your pearly whites



Everyone wants to save money while still receiving good service. With the Delta Dental PPOSM network, you'll get great dental care at lower prices. Here's how the PPO network saves you money:



In-network dentists have agreed to pre-established fees for services. On average, patients save 31.5 percent on the fee typically submitted for a claim. Delta Dental PPOSM dentists' rates are usually the best value, often better than other network rates.



Delta Dental PPO network dentists won't "balance bill" patients. That means they can't charge you the difference between their usual fee and the amount they've agreed to charge patients covered by Delta Dental.

Delta Dental PPO Network Dentists

Here's an example:

Let's say a procedure costs \$1,200, but Delta Dental PPO network dentists have agreed to charge a pre-established fee.



Your Delta Dental plan covers 50 percent of the cost.



Assuming you already met your deductible for the year, you pay the other half of the bill.



Out-of-Network Dentists

Here's an example:

If you visit an out-of-network dentist, they can bill you the full \$1,200. Delta Dental sets a limit to the amount accepted for a procedure, which is known as a maximum allowed fee.










Delta Dental covers half of the maximum allowed fee.



You pick up your half plus the \$100 that is "balance-billed" by the out-of-network dentist. Because this is an out-of-network dentist, you can be billed the difference between the maximum allowed fee and the actual cost.



Example Savings for a Common Procedure

	 Estimated Charge	 Maximum Allowed Fees	 Percentage Paid by Delta Dental	 Amount Delta Dental Pays	 Amount Dentist can Balance Bill	 Total Amount You Pay	 Your Total Cost Savings
Delta Dental PPO Network	\$1,200	\$850	50%	\$425	\$0	\$425	\$350
Out-of-Network	\$1,200	\$1,100	50%	\$550	\$100	\$650	\$0



As you can see, it pays to use Delta Dental network dentists - especially those in Delta Dental's PPO network. Visit deltadental.com today to find participating dentists in your area. **You can also download the free Delta Dental mobile app using an Apple or Android device to find dentists.**

Answers to Common Questions

Delta Dental PPO plus Premier™

Q. *What is Delta Dental?*

A. Delta Dental is the largest and oldest provider of dental insurance in the nation. In Connecticut, fully insured dental coverage is provided by Delta Dental of Connecticut. For self-funded dental benefit programs, Delta Dental of New Jersey provides administration services. The Delta Dental system provides coverage for 75 million subscribers through more than 139,000 employer groups.

Q. *Where will claims be processed?*

A. Delta Dental is the claim administrator. All claims will be processed at:

Delta Dental of New Jersey and Connecticut
1639 Route 10
Parsippany, NJ 07054

Q. *Who can be called to answer questions?*

A. Delta Dental operates a toll free customer service line. It is open 24 hours and a member or dentist can speak to a representative between the hours of 8:00 a.m. - 6:30 p.m. EST Monday through Thursday (Friday until 5:00 p.m.). Most questions can be answered by simply following the prompts using the automated voice response system. However, a representative may be accessed at any time by pressing * three times. As an example, a member may call to find out how much of his/her maximum is left for the year or the status of a claim.

The phone number is: 1-800-452-9310

Q. *Can benefits and claims be viewed online?*

A. Yes. The website is deltadentalct.com. Click on "Members" to access Benefits Connection. Registration is required.

Q. *Can any dentist be used?*

A. Yes, a member may go to any dentist. Delta Dental has two dental networks available under this plan - Delta Dental Premier® & Delta Dental PPO™. Out-of-pocket expenses will be lowest with participating dentists, especially with a Delta Dental PPO dentist. Dentists do not have to be pre-selected. Note that Delta Dental has over 351,000 participating dentists locations across the nation. Many members may currently be seeing a Delta Dental participating dentist.

Q. *What is a Delta Dental Participating Dentist?*

- A.** In order for a dentist to participate in Delta Dental's Premier network, they must first pre-file their dental fees for all procedures. A participating Premier dentist cannot charge a Delta Dental subscriber an amount that exceeds Delta Dental's maximum allowable charges for a given procedure. Therefore, if a participating dentist is visited, the problem of being billed for the difference in what a dentist charges and what is allowed for a particular procedure cannot occur.

In order for dentists to participate in the Delta Dental PPO network, they must agree to utilize a dental fee schedule established by Delta Dental as their maximum allowable charges for a given procedure. A participating PPO dentist cannot charge a Delta Dental subscriber an amount that exceeds the fee set in the schedule. This means that a patient cannot be balance billed for charges in excess of the schedule fees. Applicable deductibles and coinsurance will still apply.

In both programs, by visiting a participating dentist, members will maximize their benefit and may have lower out-of-pocket costs.

Q. *What if a member's dentist does not participate?*

- A.** The member may refer their dentist to Delta Dental. Delta Dental will contact the dentist to determine if there is interest in participating. If, however, the member is comfortable with his/her dentist and does not wish to change, that is acceptable. Delta Dental will process the claim and pay in accordance with the maximum allowable charges for each procedure. The member may, however, be required to file claim on their own. The member may also be responsible for paying the dentist. Delta Dental may reimburse the member directly. Since Delta Dental cannot control the fees of non-participating dentists, balance billing for charges greater than the allowed amount is possible.

Q. *How can a list of Participating Dentists be obtained?*

- A.** The most up-to date version is available by calling 1-800-DELTAOK. A list of providers up to a 25-mile radius of any desired zip code will be mailed to the member's address. Dentists may also be located using Delta Dental's website: deltadentalct.com.

Q. *Are claim forms necessary?*

- A.** Participating dentists have Delta Dental claim forms. If the dentist does not participate, the patient may either bring one to the dentist or Delta Dental will accept any ADA approved claim form the dentist's office presently uses. Non-itemized bills, however, are not acceptable.

Q. *How will orthodontic claims currently in process be handled?*

- A.** If your plan has an orthodontic benefit, Delta Dental recommends that the dentist submit a new claim for this treatment. The starting date of treatment and expected number of months of treatment should be included along with the charges. Delta Dental will coordinate coverage with the prior plan up to the lifetime maximum.

Q. *How can I obtain a replacement Dental ID Card?*

- A.** Replacement cards can be obtained via our website, mobile app, by sending an email to service@deltadentalnj.com, or by calling 800-452-9310.

Connect with
Delta Dental of CT
in just a few clicks!



Visit Our Website

Visit www.DeltaDentalCT.com



Or Download Our Mobile App

REGISTER TODAY!



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to Keep You Smiling**



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Schedule an Appointment



Visit DentalCentral



Take Oral Health Assessment



View Oral Health Videos



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When it Counts**

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Explanation of Benefits



View & Print ID Card



Use Our Cost Estimator Tool



(800) 452-9310



www.DeltaDentalCT.com