



Delta Dental of Colorado Small Group Dental Plans—Adult Only

Delta Dental of Colorado is the state's leading dental benefits provider, and we understand the strong connection between oral and overall health. Poor oral health can lead to and escalate serious overall health issues. In fact, more than 90% of all systemic diseases are linked to oral health.

That's why dental insurance is important and why we've partnered with Kaiser Permanente to offer several small group adult-only dental plans for employees enrolled in a Kaiser Permanente medical plan (which includes embedded dental coverage for children up to age 19). ***Members of these plans must use a provider in Delta Dental's PPO™ network, which provides access to more than 2,500 providers at substantially discounted fees.**

	Plan 1 Base Option	Plan 2 Mid Option	Plan 3 High Option
Annual Maximum, Per Adult	None	\$1,000	\$2,000
Deductible, Per Adult	None	\$50	\$50
COVERED SERVICES			
Diagnostic & Preventive	100%	100%	100%
<ul style="list-style-type: none"> Exams Cleanings X-rays 	Deductibles do not apply to Diagnostic & Preventive (D&P) services, and these services do not count against the calendar-year maximum ONLY when using a PPO™ provider for all services.		
Basic			
<ul style="list-style-type: none"> Fillings Extractions Oral Surgery Endodontics Periodontics 	Not a covered benefit	50%	80%
Major			
<ul style="list-style-type: none"> Crowns Implants Dentures 	Not a covered benefit	50%	80%
2020 RATES			
Per Adult	\$13.33	\$29.34	\$35.93

This chart provides only a brief description of services covered. The benefit booklet will provide a more complete explanation of coverage, including limitations and exclusions. If there are differences between this summary of benefits and the benefit booklet, the benefit booklet will govern.

PLAN NOTES

*Please contact your Kaiser Permanente sales representative to confirm your medical plan includes embedded dental coverage for children up to age 19.

All maximums are on a calendar-year basis. Limitations are per person. **These plans are for adults only (19 and older).**

You must see a Delta Dental of Colorado PPO provider for all services to receive benefits. If you receive treatment from a non-PPO provider, you will be responsible for all the fees charged by the provider.

Dual choice with Beta Alpha plan is available for groups with 4 or more enrolled employees as an addition to plans 2 and 3 to create two options for your employees. Employers may choose one single plan or one dual option for their employees. Contact your Delta Dental of Colorado sales rep for more information.

Delta Dental of Colorado Small Group Dental Plans—11671

Delta Dental of Colorado is the state's leading dental benefits provider, and we understand the strong connection between oral and overall health. That's why dental insurance is important and why we've partnered with Kaiser Permanente to offer a small group dental for employer groups who offer a Kaiser Permanente medical plan (which may include embedded dental coverage for children up to age 19*). **Members may visit any licensed dental provider but will get the greatest out-of-pocket savings if you see a Delta Dental PPO™ provider.**

	Standard Option	Standard Plus Ortho Option
Diagnostic & Preventive <ul style="list-style-type: none"> Exams Cleanings X-rays 	PPO: 80% Premier: 50% Non-Par: 50%	PPO: 80% Premier: 50% Non-Par: 50%
Deductibles do not apply to Diagnostic & Preventive (D&P) services, and D&P services are not applied toward calendar-year maximum ONLY when using a PPO™ or Premier® provider for all services.		
Basic <ul style="list-style-type: none"> Fillings Extractions Oral Surgery Endodontics Periodontics 	PPO: 80% Premier: 50% Non-Par: 50%	PPO: 80% Premier: 50% Non-Par: 50%
Major <ul style="list-style-type: none"> Crowns Implants Dentures 	PPO: 50% Premier: 50% Non-Par: 50%	PPO: 50% Premier: 50% Non-Par: 50%
Orthodontia^{1,2}	Not Covered	50% to \$1,000 lifetime maximum per child, to age 19 only.
2020 RATES		
	No Ortho	Ortho
Employee	\$25.02	\$25.02
Employee + Spouse	\$53.45	\$53.45
Employee + Child(ren)	\$54.32	\$61.92
Employee + Family	\$82.68	\$97.56
Deductible	Individual: \$50 Family: \$150	
Maximum	\$1,000	

See reverse for more information.

deltadentalco.com



PLAN NOTES

*Please contact your Kaiser Permanente sales representative to confirm your medical plan includes embedded dental coverage for children up to age 19.

The charts provide only a brief description of services covered. The benefit booklet will provide a more complete explanation of coverage, including limitations and exclusions. If there are differences between this summary of benefits and the benefit booklet, the benefit booklet will govern.

All maximums are on a calendar-year basis.

Limitations are per person.

¹ - Six-month waiting period may apply. Please contact your sales representative for details.

² - Deductible does not apply to orthodontia plan option.

RIGHT START 4 KIDS®

Did you know that cavities are the most chronic childhood disease? Cavities are five times more common than asthma. Children with pain from tooth decay typically miss more school and have lower grades than their peers, not to mention the lost work hours for parents. But cavities are nearly 100% preventable, and it's easy to protect your child's oral health and ensure better overall health.

RIGHT START 4 KIDS (RS4K) FROM DELTA DENTAL OF COLORADO is a unique plan design enhancement that removes most of the cost barriers to dental care by providing coverage for children up to their 13th birthday at 100% coinsurance for diagnostic & preventive, basic, and major services, with no deductible, when in-network providers are seen.* **If an out-of-network provider is seen, the adult coinsurance levels will apply.** Orthodontic services are available but are not eligible for the RS4K 100% coverage level.

The embedded pediatric dental plan will be treated as the primary plan and RS4K will be secondary, which means that this new benefit will pick up any remaining coinsurance and deductible after the initial embedded plan claim has been paid.

* Right Start 4 Kids is subject to limitations, exclusions, and annual maximum.



UNDERWRITING GUIDELINES

Quoted rates are valid for small groups of 2-100 enrolled employees. **Adults only.**

Effective Date	1/1/2020
Rate Guarantee	12-month rate guarantee for effective dates 1/1/2020–12/31/2020 (based on individual group's renewal date).
Broker Commissions	10%
Open Enrollment	Open enrollment is standard for all plans. Members may add dental coverage once per year. Members may change plan options only at open enrollment.
Waiting Periods	No benefit waiting periods.
Eligibility	Employees are eligible the first of the month following 60 days or same as medical. Employee must be enrolled in dental for family members to be eligible.
Employer Contribution	No employer contribution requirements.
Billing	Payment by ACH is required for all groups with less than 10 enrolled employees. Delta Dental will bill the group electronically.
Geographic Requirements	Company must be headquartered in Colorado.
Network	Services provided outside of the PPO™ network are NOT covered.* Subscribers MUST see a Delta Dental PPO provider to get benefits.
Single Option	Available for groups with 2 to 100 enrolled employees.
Dual Option	Dual option available for groups with 4 or more enrolled employees (at least one in each plan).*
Orthodontia Benefits	Adult only plans do not include orthodontia benefits.
Declined Industry Codes	Civic Social Clubs 8641/813410, Private Households 8811/814110, and Non-classifiable 9999

*Not applicable to 11671 plan.

SUBMIT THE FOLLOWING TO ENROLL A GROUP:

Original quote

Group application form

Group Health Plan Certification form

ACH Authorization form

Website Authorization form

Proof of prior coverage (if applicable)

Federal wage and tax Schedule C

Enrollment forms

SEND COMPLETED FORMS AND PAYMENT TO:

Delta Dental of Colorado, Sales & Client Services, 4582 S. Ulster Street, Suite 800, Denver, Colorado 80237
Phone: 303-741-9300, ext. 3300, Option 6 | Fax: 303-741-4233 | Email: salesteam@ddpco.com