

Florida College System Risk Management Consortium

Your Two Plan Options

Choosing between the Delta Dental PPOSM and DeltaCare[®] USA plans



We'll do whatever it takes and then some.

Plan Features	Delta Dental PPO	DeltaCare USA
Coinsurance/ copayments	Covered services paid at applicable percentage — for example, fillings are covered at 80% of allowed amount — you pay the remaining 20%	Covered procedures have predetermined dollar copayments for services provided by network dentists (this means out-of-pocket costs are predictable)
Coverage	Wide range of covered services No exclusions for most pre-existing conditions	Plan covers nearly 300 procedures No or low copayments for most diagnostic and preventive services No exclusions for pre-existing conditions or missing teeth
Dentist network	Freedom to choose any licensed dentist; selecting a PPO dentist will usually result in the lowest out-of-pocket costs	You select a dentist from a list of network dental facilities, and you must visit this dentist to receive benefits
Changing your dentist	Change dentists any time without contacting Delta Dental	You must contact Delta Dental to change your selected dentist, and can do so via telephone or internet
Transitions from previous plan	Coverage is provided only for treatment started after your effective date of coverage under the Delta Dental plan	Coverage is provided only for treatment started after your effective date of coverage under the Delta Dental plan
Orthodontic treatment in progress (when covered under prior plan)	Plan will pay the amount of the total case fee calculated to be Delta Dental's liability, subject to lifetime and annual maximum benefits (when plan includes orthodontic coverage)	Covers new enrollees who, on the effective date of their coverage, are in active treatment started under their previous employer-sponsored dental plan Enrollees are responsible for all copayments and fees subject to the provisions of their prior dental plan
Authorization for specialty care treatment	Preauthorization for treatment is not required	Written or verbal preauthorization may be required for treatment from a specialist; your DeltaCare USA dentist will coordinate your specialty care treatment authorization for you
Out-of-area coverage	Visit any licensed dentist	Limited to emergency care allowance
Deductibles and maximums	Deductibles and annual maximums apply to most plan designs	No annual deductible or annual dollar maximums
Claims	No claim forms required when treatment is received from a Delta Dental dentist; Delta Dental dentists file claim forms and accept payment directly from Delta Dental You will never have to pay more than the patient's share at the time of treatment when you visit a Delta Dental dentist	No claim forms required You only need to pay the specified copayment for covered services provided at the time of your visit

WE KEEP YOU SMILING®

Why do 56 million enrollees trust their smiles to Delta Dental?

- More dentists
- Simpler process
- Less out-of-pocket

SmileWaySM Wellness Program

Find all of our dental health resources, including risk assessment quizzes, articles, videos and a free newsletter subscription, at: mysmileway.com.

Connect with us!

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Product administration

Delta Dental PPOSM 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. In Texas, Delta Dental Insurance Company provides a Dental Provider Organization (DPO) plan.

DeltaCare® USA is underwritten in these states by these entities: AL – Alpha Dental of Alabama, Inc.; AZ – Alpha Dental of Arizona, Inc.; CA – Delta Dental of California; AR, CO, IA, MI, NC, OR, RI, SC, WA, WI – Dentegra Insurance Company; DE, FL, GA, KS, TN, WV and District of Columbia – Delta Dental Insurance Company; HI, ID, IL, IN, KY, MD, MO, NJ, OH, TX – Alpha Dental Programs, Inc.; NV – Alpha Dental of Nevada, Inc.; UT – Alpha Dental of Utah, Inc.; NM – Alpha Dental of New Mexico, Inc.; NY – Delta Dental of New York; PA – Delta Dental of Pennsylvania; VA – Delta Dental of Virginia. Delta Dental Insurance Company acts as the DeltaCare USA administrator in all these states. These companies are financially responsible for their own products.

Please refer to your plan booklet for waiting periods and a list of benefits, limitations and exclusions.

The Value of Choice

When it comes to choosing a dental plan, you want benefits that fit the needs of you and your family. Delta Dental PPO and DeltaCare USA both offer comprehensive dental coverage, quality care and excellent customer service.

Benefits and Covered Services*	DeltaCare® USA FL48N	Delta Dental PPO Network**	Delta Dental non-PPO Network**
	Copayment (+ \$5 office visit)	Delta Dental Pays	Delta Dental Pays
DIAGNOSTIC (oral examinations/ bitewing x-rays)	\$0-\$45	100%	100%
PREVENTIVE routine cleanings (2 per calendar year) fluoride treatment, space maintainers	\$0-\$45	100%	100%
BASIC BENEFITS fillings, sealants, endodontics (root canal), denture repairs, oral surgery, periodontics (gum treatment--surgical/ non-surgical)	\$0 - \$485	80%	60%
MAJOR BENEFITS crowns, inlays, onlays, cast restorations, bridges, dentures	\$0 - \$660	50%	40%
ORTHODONTIC BENEFITS dependent children and adults	\$2,100 child \$2,250 adult	Not a benefit	Not a benefit
DEDUCTIBLE (waived on D&P)	None	\$50 per person \$150 per family	\$50 per person \$150 per family
PLAN YEAR MAXIMUM	None	\$1,000 per person	\$1,000 per person
LIFETIME MAXIMUM FOR ORTHODONTIC	None	Not a benefit	Not a benefit

*Limitations or waiting periods may apply for some benefits, some services may be excluded from your plan. Reimbursement is based on Delta Dental contract allowances and not necessarily each dentist's actual fees.

**PPO dentists (in network) are paid on the PPO provider fee schedule.

**Delta Dental Premier dentists (out-of-network) are paid on the PPO provider fee schedule.

**Non Delta Dental dentists (out-of-network) are paid up to the PPO provider fee schedule.



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