

Group name: LACHER & ASSOCIATES INS AGENCY

Group number: 20796-05008

Effective date: DECEMBER 1, 2024

Keep Smiling Delta Dental PPO™



Stay in network to save

Visit a dentist in the PPO¹ network to maximize your savings.² These dentists have agreed to reduced fees, and you won't get charged more than your expected share of the bill.³ Find a PPO dentist at **deltadentalins.com**.

If you can't find a PPO dentist, consider a Delta Dental Premier® dentist. These dentists have agreed to set fees and offer another opportunity to save.

Set up an online account

Get information about your plan, check benefits and eligibility information, find a network dentist and more. Sign up for an online account at **deltadentalins.com**.

Check in without an ID card

You don't need a Delta Dental ID card when you visit the dentist. Just provide your name, birth date and enrollee ID or Social Security number. If your family members are covered under your plan, they'll need to

provide your information. Prefer to have an ID card? Simply log in to your account to view or print your card.

Coordinate dual coverage

If you're covered under two plans, ask your dental office to include information about both plans with your claim — we'll handle the rest.

Understand transition of care

Generally, multi-stage procedures are covered under your current plan only if treatment began after your plan's effective date of coverage.⁴ Log in to your online account to find this date.

Get LASIK and hearing aid discounts

With access to QualSight and Amplifon Hearing Health Care⁵, you can save as much as 50% on LASIK procedures and more than 60% on hearing aids. To take advantage of these discounts, call QualSight at 855-248-2020 and Amplifon at 888-779-1429.

Save with a PPO dentist







 $^{^{1}}$ In Texas, Delta Dental Insurance Company provides a dental provider organization (DPO) plan

² You can still visit any licensed dentist, but your out-of-pocket costs may be higher if you choose a non-PPO dentist. Network dentists are paid contracted fees.

³ You are responsible for any applicable deductibles, coinsurance, amounts over annual or lifetime maximums and charges for non-covered services. Out-of-network dentists may bill the difference between their usual fee and Delta Dental's maximum contract allowance.

⁴ Applies only to procedures covered under your plan. If you began treatment prior to your effective date of coverage, you or your prior carrier is responsible for any costs. Group- and state-specific exceptions may apply. If you are currently undergoing active orthodontic treatment, you may be eligible to continue treatment under Delta Dental PPO. Review your Evidence of Coverage, Summary Plan Description or Group Dental Service Contract for specific details about your plan.

⁵ Vision corrective services and Amplifon's hearing health care services are not insured benefits. Delta Dental makes the vision corrective services program and hearing health care services program available to you to provide access to the preferred pricing for LASIK surgery and for hearing aids and other hearing health services.

Small Business Program Benefit Highlights

Delta Dental PPO Plus Premier®

Plan: Advantage 200

Eligibility

Who's eligible for benefits?

- You
- Your spouse
- Dependent children up to age 26

Deductibles

\$50 per person, \$150 per family each calendar year

Waiting periods¹

Basic services: None
Major services: 12 months
Prosthodontics: 12 months
Orthodontics: 12 months

Maximums

\$1,500 per person each calendar year

Benefits and Covered Services*	Delta Dental PPO dentists ²	Delta Dental Premier dentists ^{2, 3}	non-Delta Dental dentists ^{2, 4}
Diagnostic & preventive services (D&P) Exam, cleanings, x-rays and enhanced pregnancy benefit	100%	100%	100%
	You don't have to meet your deductible to get coverage for diagnostic and preventive services.		
Basic services Fillings, denture repair and sealants	80%	80%	80%
Endodontics (Major services waiting period applies) Root canals	80%	80%	80%
Oral surgery (Major services waiting period applies)	80%	80%	80%
Periodontics (Major services waiting period applies) Gum treatment	80%	80%	80%
Major services (Waiting period applies) Crowns, inlays, onlays and cast restorations	50%	50%	50%
Prosthodontics (Waiting period applies) Bridges, dentures and implants	50%	50%	50%
Orthodontics (Waiting period applies) Child only Lifetime maximum per person	50% \$1,500	50% \$1,500	50% \$1,500

Delta Dental of Pennsylvania One Delta Drive Mechanicsburg, PA 17055 deltadentalins.com Customer service 800-932-0783

Claims address P.O. Box 2105 Mechanicsburg, PA 17055

¹May be waived for all initial enrollees and their dependents when this employer previously provided comprehensive dental coverage and there was no break in coverage. New hires and their dependents are subject to the waiting period.

²Reimbursement is based on: 1) PPO contracted fees for PPO dentists, 2) Premier contracted fees for Premier dentists and 3) the plan contract allowance for non-Delta Dental dentists.

³ Delta Dental Premier® dentists are considered non-PPO dentists.

⁴Non-Delta Dental Providers have no agreement with Delta Dental and are free to bill you any difference between what Delta Dental pays and the submitted fee.

^{*} This benefit information is not intended to replace or serve as the plan's Evidence of Coverage, Summary Plan Description or Group Dental Service Contract. If you have specific questions about the benefits, limitations or exclusions of your plan, please consult your company's benefits representative.