

Calendar Year Deductible	
<ul style="list-style-type: none"> • Per Person • Family Aggregate Maximum 	<p>\$50 \$150</p>
	Plan Pays:
Preventive & Diagnostic (No Deductible, Not Applicable to Calendar Year Max)	100%
<ul style="list-style-type: none"> • Exams, Cleanings • Bitewing X-Rays (2 per calendar year for persons 18 and younger, once per calendar year for persons 19 and over) • Full Mouth X-Rays (1 set every five years) • Fluoride Treatment (1 per calendar year for children to age 19) • Space Maintainers 	
Remaining Basic (After Deductible)	80%
<ul style="list-style-type: none"> • Fillings (including composites), Extractions, Root Canals (Endodontics) • Periodontal, Oral Surgery • Sealants (To age 16) 	
Crowns & Prosthodontics (After Deductible)	60%
<ul style="list-style-type: none"> • Crowns, Gold Restorations • Bridgework, Full & Partial Dentures • Repair of Dentures • Implants 	
Calendar Year Maximum (Per Person)	\$2,000
Orthodontia (Adults & Dependent Children)	
<ul style="list-style-type: none"> • Coinsurance • Lifetime Maximum 	<p>50% \$2,000</p>

Dependent children are covered to the end of the month in which they turn 26.

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™ from Delta Dental allows you to increase your benefits. This valuable benefit feature allows you to carry over a portion of your unused standard annual maximum benefit limit into the next year and beyond.

Carryover Max is easy and automatic:

- To qualify for Carryover Max, 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. If you fail to do so, any accumulated carryover will be lost.
- A covered person is eligible for the Carryover Max 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. For example, if your standard annual maximum is \$1,000 and you use \$200, you can carry over \$200 ($\$800 \times 25\% = \200).
- 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 has two networks available under this plan. The Delta Dental Premier[®] network is the largest of the Delta Dental networks with over 351,000 participating dentist offices nationally (80%+). Delta Dental PPO[™] is a smaller, but more discounted network with over 266,000 participating dentist offices nationwide. Delta Dental's network discounts average 25% to 35% less.

You may use any fully licensed dentist under this plan, but it is to your advantage to use a network dentist, especially PPO, since they accept the Delta Dental allowance as their maximum charge and cannot bill Delta Dental patients for amounts above this level. Delta Dental PPOSM dentists offer the lowest fees of our networks.

Participating dentists will be paid directly by Delta Dental for covered services. Non-participating dentists will bill you directly, and Delta Dental may make claim payment directly to you. You will maximize benefits and reduce paperwork by using a Delta Dental participating dentist.

If you do not have a dentist, you may obtain a current listing of participating dentists in any area, by visiting our website at deltadentalct.com. At the time of your first appointment, tell the dentist that you are covered under this program and provide your group number and ID number. Your dependents, if covered, should provide the employee's ID number. Claim questions and other information needs should be directed to Delta Dental's customer service department 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. 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 Connecticut!

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

MySmile®

Find free tools that make navigating your Delta Dental benefits simple and secure. The subscriber and any adult dependents on the plan can create their account with or without an ID number.

Find a Dentist

Locate a dentist near where you work or live at DeltaDentalCT.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 DeltaDentalCT.com/MySmile and click “Register.”
- 2 Choose if you’re a subscriber or dependent, and select “Continue” at the bottom of the page.
- 3 Enter your name, member ID, and birthdate, 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**.