

HTC America, Inc.  
Group # 09416

Delta Dental PPO <sup>SM</sup> — Enhanced Benefit Summary				
<b>Effective Date</b>	January 1, 2024			
<b>Benefit Period</b>	January 1 <sup>st</sup> – December 31 <sup>st</sup>			
<b>Benefit Period Deductible</b> Per Person/Per Family Waived on Class 1 Services	\$50/\$150			
<b>Annual Maximum</b>	\$2,000			
<b>Diagnostic &amp; Preventative Waiver</b>	Class 1 Services do not Accumulate against the Annual Maximum			
<b>TMJ</b> Annual Maximum Lifetime Maximum	50% \$1,000 \$5,000			
<b>Orthodontia</b> Adult & Child(ren) Coinsurance & Lifetime Maximum (Per Person)	50% \$1,500 Lifetime			
	Dental Network			
	Delta Dental PPO <sup>SM</sup> Dentist	Delta Dental Premier <sup>®</sup> Dentist	Non-Participating Dentist	Out-of-State (Out-of-Service-Area Dentist
Class I – Diagnostic & Preventive				
Exams, X-rays, & Cleanings	100%	100%	100%	100%
Fluoride & Sealants				
Periodontal Maintenance				
Class II – Restorative				
Fillings & Posterior Composites	80%	80%	80%	80%
Oral Surgery				
Endodontics (Root Canal)				
Periodontics				
Athletic Mouth Guard				
Class III – Major				
Crowns & Bridges	50%	50%	50%	50%
Dentures & Partial Dentures				
Implants				



This is only a brief summary of benefits and does not include all information about this plan. This summary is not a contract for benefits. Once you are enrolled you will receive a benefits booklet that details your Delta Dental of Washington plan benefits. Please call our customer service department if you have any questions or visit us at [DeltaDentalWA.com](http://DeltaDentalWA.com).

## Put your dental benefits in the palm of your hand!

### Activate your FREE MySmile® account

Get started at [DeltaDentalWA.com/mysmile](https://DeltaDentalWA.com/mysmile). Review your coverage overview, benefits usage, claims status and Explanation of Benefits (EOBs). It's how you use your benefits, with easy-to-use tools including:

- Digital ID Card
- Find a Dentist
- Cost Estimator

**Save a tree, save yourself the wait.** Choose "email notifications" in your MySmile account's Communication Preferences to reduce your carbon footprint AND receive EOBs more quickly!

### Choose an in-network dentist

Seeing a non-participating dentist means greater out-of-pocket costs! Your plan gives you access to the Delta Dental PPO network. These dentists:

1. Provide treatment according to your plan's specific guidelines
2. Agree to accept lower fees
3. File claims for you

### Find an in-network dentist near you:

1. Visit [DeltaDentalWA.com](https://DeltaDentalWA.com)
2. Click on 'Online Tools' and use our 'Find a Dentist' tool
3. Select 'Delta Dental PPO' to filter your search results



### Visit your dentist regularly

Your plan covers preventive care visits each year. Regular cleanings and check-ups are essential to keeping your smile healthy and preventing painful, expensive problems down the road.

### Get a Confirmation of Treatment and Cost

When you need extensive treatment, like a crown, ask your dentist for a "Pre-treatment estimate." We'll send a **Confirmation of Treatment and Cost** document that details your dentist's treatment plan, what your benefits cover, and how much you may owe your dentist for the treatment.



### Still have questions? Contact us, we're happy to help.

Call 800.554.1907, Monday – Friday from 7am to 5pm, Pacific Time

Text 833.604.1246

Visit [DeltaDentalWA.com](https://DeltaDentalWA.com)