City of Portland

Dental Benefit Overview





What You Need to Know

- ▲ Northeast Delta Dental is a local company with a national network
- ▲ You can see any dentist, but get the best value when in-network

Topics We'll Cover

- ▲ Delta's Network
- ▲ Health through Oral Wellness® (HOW®) Program
- ▲ Double up Maximum
- Online tools and mobile resources

City of Portland

Outline of Coverage Delta Dental PPO plus Premier Network



High Plan

Effective: July 1, 2023 Group Number: 60380

Northeast Delta Dental

Read Your Dental Plan Description Carefully—This Outline of Coverage provides a very brief description of the important features of your dental benefits plan. This is not the insurance contract, and only the actual policy provisions will control. The Dental Plan Description itself sets forth in detail the rights and obligations of both you and your insurance company. It is therefore important that you READ YOUR Dental Plan Description CAREFULLY! Not all time limitations and exclusions are shown herein. Benefit percentages shown are based on the actual charges submitted up to the Maximum Allowable Charge for participating dentists, or Delta Dental's allowance for non-participating dentists.

Diagnostic / Preventive (Coverage A)	Basic Restorative (Coverage B)	Major Restorative (Coverage C)	Orthodontics (Coverage D)
No Deductible	Calendar Year Deductible per Person/Family: \$50/\$150		No Deductible
DIAGNOSTIC: Evaluations twice in a 12-month period; this includes periodic, limited, problem-focused, and isomprehensive evaluations. Grays (complete series or panoramic film) income in a 5-year period	RESTORATIVE: Amalgam (silver) fillings; Resin restorations (white) ORAL SURGERY: Surgical and routine extractions	PROSTHODONTICS: Removable and fixed partial dentures (bridge); complete dentures Rebase and reline (dentures) Crowns	ORTHODONTICS: Correction of malposed (crooked) teeth for dependent children and adults
Bitewing x-rays once in a 12-month period	ENDODONTICS: Root canal therapy	Onlays	
C-rays of individual teeth as necessary Brush biopsy once in a 12-month period PREVENTIVE: Two cleanings in a 12-month period	PERIODONTICS: Periodontal maintenance (cleaning) Note: Cleanings are limited to two in a 12-month period; these may be routine (Coverage A) or periodontal (Coverage B), or a combination of both.	Implants	
luoride once in a 12-month period to age 19	Treatment of gum disease		
ipace maintainers to age 16 sealant application to permanent molars, once in a 3-year period per tooth, for children to age 19	Clinical crown lengthening once per tooth per lifetime DENTURE REPAIR: Repair of a removable denture to its original condition EMERGENCY PALLIATIVE TREATMENT		
Delta Dental Pays: 100% No Waiting Period	Delta Dental Pays: 80% No Waiting Period	Delta Dental Pays: 50% No Waiting Period	Delta Dental Pays: 50% No Waiting Period

City of Portland

Outline of Coverage Delta Dental PPO plus Premier Network



Low Plan

Effective: July 1, 2024 Group Number: 60380

Northeast Delta Dental

Read Your Dental Plan Description Carefully—This Outline of Coverage provides a very brief description of the important features of your dental benefits plan. This is not the insurance contract, and only the actual policy provisions will control. The Dental Plan Description itself sets forth in detail the rights and obligations of both you and your insurance company. It is therefore important that you READ YOUR Dental Plan Description CAREFULLY! Not all time limitations and exclusions are shown herein. Benefit percentages shown are based on the actual charges submitted up to the Maximum Allowable Charge for participating dentists, or Delta Dental's allowance for non-participating dentists.

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Periodontal maintenance (cleaning) Note: Cleanings are limited to two in a 12-month period; these may be routine (Coverage A) or periodontal (Coverage B), or a combination of both. Fluoride once in a 12-month period to age 19 Treatment of gum disease Space maintainers to age 16 Sealant application to permanent molars, once in a 3-year period per tooth, for children to age 19 DENTURE REPAIR: Repair of a removable denture to its original condition	Bitewing x-rays once in a 12-month period		Onlays	
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EMERGENCY PALLIATIVE TREATMENT	··			
		EMERGENCY PALLIATIVE TREATMENT		
Delta Dental Pays: 100%Delta Dental Pays: 70%Delta Dental Pays: 50%Delta Dental Pays: 50%No Waiting PeriodNo Waiting PeriodNo Waiting PeriodNo Waiting Period		•	•	
		r Maximum: \$1000 up to \$2000 per Person with Doo ough Oral Wellness® program included (please see reverse		Lifetime Maximum: \$1,000 per Person

Delta Dental PPO Plus Premier Network

Two provider networks

- Patients can see any dentist
- Delta Dental Network Dentists =Convenience + Savings
- Advantages of Network (Premier or PPO) Providers:
 - ✓ No Balance Billing
 - ✓ No Claim Paperwork
 - ✓ No Upfront Payment for Covered Services
- Delta Dental PPO offers the Best Value
 - ✓ Lower out-of-pocket expenses
 - ✓ Stretch annual max dollars further

A DELTA DENTAL

Network Cost Savings Example

Here is an example of how the Delta Dental PPO Plus Premier™ network saves you money:

How much will you save and how much will you pay out-of-pocket?*

Full charge of procedure \$1,000*

	ALLOWED	PAYMENT
Greatest Savings		Delta Dental pays \$400
In-Network Delta Dental PPO™ 50% benefit Coverage	\$800	You pay \$400
		You save \$200
In-Network Delta Dental Premier® 50% benefit Coverage		Delta Dental pays \$450
	\$900	You pay \$450
		You save \$100
	\$720	Delta Dental pays \$360
Out-of-Network 50% benefit Coverage Potential balance billing charge		You pay \$640 Includes \$280 balance billing (\$1,000-\$360 = \$640)
		You save \$0

The Delta Dental PPO Plus Premier network arrangement offers access to the nation's largest Premier network of dentists while simultaneously offering access to PPO providers who have agreed to accept even lower fees for Delta Dental patients.

Because Delta Dental network dentists have agreed to accept a lower reimbursement for services, subscribers experience lower out-of-pocket costs and the plan maximum will cover more care. This means real cost savings.

*Please note: this example is for illustrative purposes only and assumes any member deductible has been met. Benefit percentage and out-of-network reimbursement may vary by plans, procedures and contract setup. Please check your outline of coverage for exact benefit plant declare.

HOW[®] it Works

- Dental office performs a clinical risk assessment, which is instantly submitted electronically to Northeast Delta Dental.
- Patients that score a 3-5 on
 a 5-point risk scale for being at
 risk for oral disease qualify for
 additional preventive care benefits.
- The additional preventive benefits can be applied immediately at that dental visit. (Ex: fluoride treatment for adults at-risk for tooth decay).
- Any additional benefits that a member receives do apply toward annual maximum.

Health through Oral Wellness®
HOW® Program

Based on the concept of patient-centered oral health, HOW® provides additional preventive benefits to members who are at risk for oral disease, thereby helping them achieve better oral and overall health.



HOW® Employee Communications





HOW HEALTH through

△ DELTA DENTAL

FOR YOUR DENTIST

Extra Benefits—No Additional Charge—For Your At-Risk Patients

Dear Dental Colleague,

Many of your Northeast Delta Dental patients who are at risk for caries and/or periodontal disease may be eligible for additional preventive benefits at no additional charge to them through the Health through Oral Wellness* (HOW*) program.* (See these benefits below.) To assess their risk level, they need your help! Please complete an oral health risk assessment using the PreViser* clinical risk assessment tool. It is provided to you by Northeast Delta Dental at no charge.

Getting started is quick and easy—you can perform this assessment on your patients immediately. To create your free PreViser* account, please visit my.previser.com/start. If you have any questions please call Northeast Delta Dental's Provider Services department at 1-800-537-1715, extension 1100, and/or view a training video at previser.com/free.



STEP 1:

The dentist or hygienist performs a clinical oral health risk assessment and submits it to Northeast Delta Dental electronically and receives a score.



Members scoring between 3 and 5 on a five-point scale are immediately eligible for enhanced benefits.*

*Additional preventive benefits are subject to the provision of your patient's Northeast Delta Dental policy. Only the clinical risk assessment performed by you can determine your patient's eligibility for additional preventive benefits.

Oral Health Condition	Benefits	Frequency
Carles (Tooth Decay)	Carles Susceptibility Test Child or Adult Cleaning Fluoride Varnish or Topical Fluoride Nutritional Counseling or Oral Hyglene Instruction Sealants	Once per 12 months Combination up to 4 per 12 months Combination up to 4 per 12 months Once per 12 months Once per 12 months Once per 3 years
Periodontal (Gum) Disease	Adult Cleaning and Periodontal Maintenance Nutritional Counseling or Tobacco Cessation Counseling or Oral Hyglene Instruction	Up to 4 per 12 months ⁵ Once per 12 months ⁴ Once per 12 months ⁴ Once per 12 months ⁴

*Enhanced benefits are subject to change and are subject to standard policy provisions, including, but not limited to, coinsurance percentages, copayments, and plan maximums. As with all benefits, eligibility confirmation should be obtained via Northeast Delita Dental at www.nedelta.com or from customer service at 1-800-835-2700.

- Is there one nutritional counseling or one oral hygiene instruction is covered in a 12-month period.

 5 Sealants are a covered benefit based on caries risk assessment for unrestored primary molars and for unrestored permanent premolars, and molars—
 one sealant per tooth every three years.

 4 Combination of prophylaxis, periodontal maintenance, or full mouth debridement (once in a lifetime benefit) not to exceed four in a 12-month period.

 4 Combination for prophylaxis, periodontal maintenance, or full mouth debridement (once in a lifetime benefit) not to exceed four in a 12-month period.

 5 lither one nutritional counseling, or one oral hygiene instruction, or one tobacco cessation counseling is covered in a 12-month period.

Form No. HOW-SOER group Rev. 17522



Double-Up Maxsm

Carryover Benefit

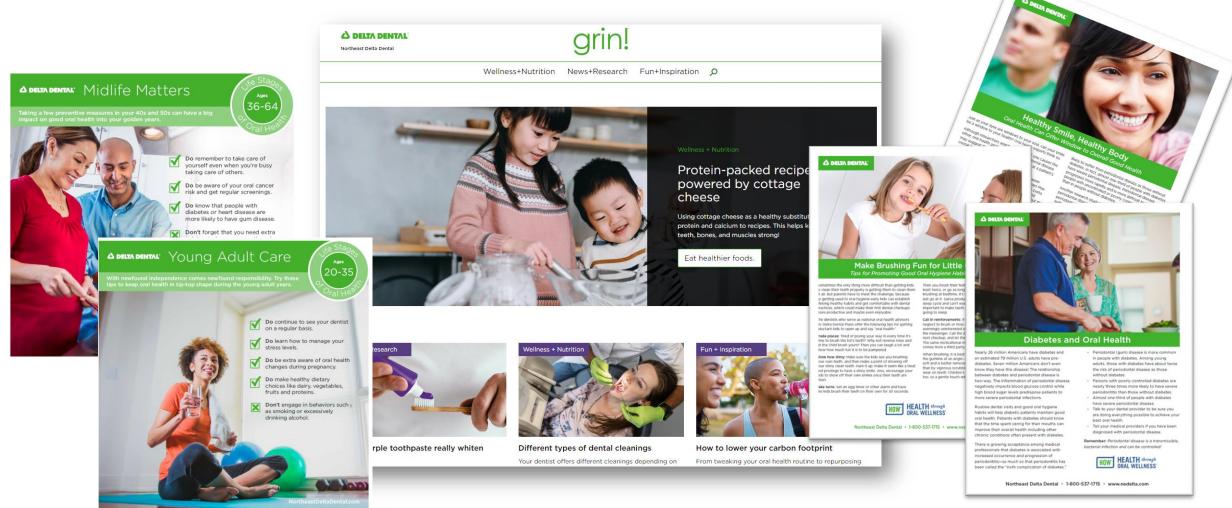
How to qualify:

- Northeast Delta Dental must pay a claim for either an oral evaluation or cleaning during a Calendar Year.
- An enrollee's paid claims during the Calendar Year cannot exceed \$500.
- Northeast Delta Dental will automatically carryover \$250 to the next calendar year

Online Oral Wellness Resources

https://www.nedelta.com/oral-health-resources





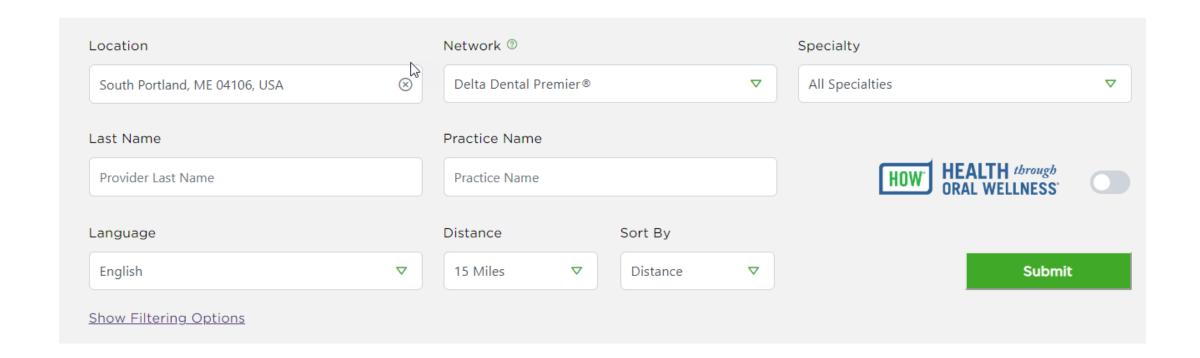
Patient Portal & Mobile App

nedelta.com/patients

- Find Claim and Benefit Information
- View and Print EOBs
- Access Dental Plan Documents
- Print Additional ID Cards/Digital ID Card
- Search for a network dentist
- Download helpful forms and information



Provider Directory



Provider Search

MARC STROOBANTS

General Dentist

MIND YOUR MOUTH PA LLC 225 WATERMAN DR #2 SOUTH PORTLAND, ME 04106 (207) 200-4106



ABOUT THESE NETWORKS

Delta Dental PPO™ accepting new patients

Delta Dental Premier* accepting new patients

Martin's Point* Generations Advantage accepting new patients

WellSense Medicare Advantage accepting new patients

Provider Info

A Male

Rnglish

A Treats disabled adults

Office Info

Early Morning Hours, Evening Hours

Rnglish

Public transit access

& Accessible

A Treats disabled adults, Treats disabled children

DELTA DENTAL°



24/7 access to quality dental care. Go to nedelta.com/patients Use Northeast Delta Dental Virtual Visits for:

- emergencies when your dentist is not available
- to consult with a dentist without leaving home, or while traveling

△ DELTA DENTAL

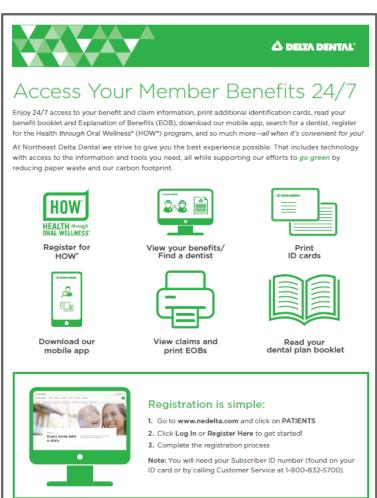


Employee Communication Pieces

Patient Portal

Mobile App

Teledentistry



dentist in your area is easy! is located in the top right corner of every page Delta Dental neral Information about your location and netv nd a list of dentists serving your area will be d

ork, and if you are ower your out-of-packet ental PPO dentist for



ellness® (HOW®)

program designed to promote better oral health embers. HOW* is all about YOU because it's bas eds. Best of all, it's secure, confidential, and abso

enrolled in a PPO plus Premier Program, ple

iWellness.com and click on "Register Now

ister, please take the free oral health risk as

s your results with you and perform a clinical shown on your clinical assessment, you may be cost if your employer participates in the HOV

mine your eligibility for additional preventive benefit

Program

, including quality

housands of hearing est independent hearing



Mobile App Helping members manage their oral health

Oral health is important to Delta Dental - and to overall health! W our mobile app to make it easy for your employees to make the me benefits. Members can search for a dentist near them, access ID ca on their mobile device.

www.nedelta.com

The Delta Dental Mobile App is optimized for iOS (Apple) and Android devices. To download our app on your device. visit the App Store (Apple) or Google Play (Android) and search for Delta Dental Mobile App. Or, scan the QR code at right. You will need an internet connection in order to download and use most features of our

Getting started

Delta Dental Mobile Ap

- · Quick and easy access card - no more lookii
- · A dentist search tool t quickly find an in-netw
- Save your preferred de

DELTA DEN

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Roughly 20% of · Our easy-to-use Denta tool provides estimate common dental care r geographic areas.)





Access to dental care 24/7 with Teledentistry.com

What is teledentistry?

Teledentistry is the use of mobile technologies, including interactive audio and video, to provide oral health consultations, treatment and transfer of dental information.

Virtual visits are an effective way to receive care when the patient has a dental emergency or concern and it is outside of normal business hours, they are travelling, or they do not have a regular dentist.

20% of Americans or mobile apps as their first health

comfortable



Patient determines regular dentist is unavailable and initiates consultation via phone or online at (866) 393-4022 or northeast-delta-dental

How it works



Self service prompts quide patient through the system to reach a live dentist for an oral evaluation



Patient is referred to a Delta Dental in-network provider for follow-up

- 24/7 emergency access for patients avoids trips to the
- Patients without a regular provider will be referred to an in-network dentist for their follow-up care.
- · Patients who already have a provider will be referred back to their regular dentist for follow-up care.
- · Easy-to-use platform streamlines patient/provider interaction and removes a barrier to care for the patient.



Important note: a virtual visit is considered to be a "problem-focused exam" and counts as one of the annual examinations covered by a

Learn more at www.nedelta.com or from our Customer Service Representatives at 1-800-832-5700.



Questions About Your Dental Benefits?

- ▲ Refer to your Outline of Coverage and/or Summary Plan Descriptions
- ▲ View claims and benefits on our secure Patient Benefit Lookup portal <u>www.nedelta.com/Patients</u>
- ▲ Contact Northeast Delta Dental Customer Service at 1-800-832-5700, #2 or nedelta@nedelta.com

Questions



