Martin's Point Health Care

Outline of Coverage Delta Dental PPO plus Premier Network

△ DELTA DENTAL®

Group Number: 6759 Effective: 1/1/2024

Northeast Delta Dental

Read Your Summary 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 Summary 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 Summary 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	Basic Restorative	Major Restorative	Orthodontics	
(Coverage A)	(Coverage B)	(Coverage C)	(Coverage D)	
No Deductible	Calendar Year Deductible pe	No Deductible		
DIAGNOSTIC:	RESTORATIVE:	PROSTHODONTICS:	ORTHODONTICS:	
Evaluations twice in a 12-month period; this	Amalgam (silver) fillings;	Removable and fixed partial dentures (bridge);	Correction of malposed (crooked) teeth for	
includes periodic, limited, problem-focused, and comprehensive evaluations.	Resin restorations	complete dentures	dependent children and adults	
comprehensive evaluations.	ORAL SURGERY:	Rebase and reline (dentures)		
K-rays (comprehensive (full-mouth) series or	Surgical and routine extractions			
panoramic film) once in a 5-year period		Crowns		
	ENDODONTICS:			
Bitewing x-rays once in a 12-month period	Root canal therapy	Onlays		
X-rays of individual teeth as necessary	PERIODONTICS:	Implants		
	Periodontal maintenance (cleaning)	·		
Brush biopsy once in a 12-month period				
	Note: Cleanings are limited to two in a 12-month			
PREVENTIVE:	period; these may be routine (Coverage A) or			
Two cleanings in a 12-month period	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	Clinical crown lengthening once per tooth per lifetime			
Sealant application to permanent molars, once in a	DENTURE REPAIR:			
3-year period per tooth, for children to age 19	Repair of a removable denture to its original condition			
Note: Expenses incurred for covered Diagnostic and	EMERGENCY PALLIATIVE TREATMENT			
Preventive services also accrue to your annual	EWERGENCY PALLIATIVE TREATIVIENT			
maximum.				
Delta Dental Pays: 100%	Delta Dental Pays: 80%	Delta Dental Pays: 50%	Delta Dental Pays: 50%	
No Waiting Period	No Waiting Period	No Waiting Period	No Waiting Period	
		•	•	
Calendar Year Maximum: \$2000 per Person			Lifetime Maximum:	
	Health through Oral Wellness® program included			

^{*}Any applicable waiting period is waived for employees and dependents covered immediately prior to the original effective date of this plan when this plan is replacing an existing group dental policy that includes the services to which the waiting period applies. New enrollees, effective after the group's original effective date, are subject to waiting periods, unless moving from one Northeast Delta Dental plan to this Northeast Delta Dental plan with no more than one month gap in coverage. Waiting periods do not apply to eligible enrollees under nineteen (19) years of age except for orthodontic benefits.

Delta Dental Premier Network

You will get the best value from your Delta Dental Plan when you receive your dental care from one of our Premier network participating dentists:

- ✓ No Balance Billing: Because participating dentists accept Northeast Delta Dental's allowed fees for services, you will typically pay less when you visit a participating dentist.
- ✓ No Claims Paperwork: Participating dentists will prepare and submit claims for you.
- Direct Payment: Northeast Delta Dental pays participating dentists directly, so you don't have to pay the covered amount up front and wait for a reimbursement check.

To find out if your dentist participates in our Premier network, you can: call your dentist, visit our website at nedelta.com, or call Customer Service at 1-800-832-5700.

Claim Process for Participating Dentists

Your participating dentist will submit your claim to Northeast Delta Dental (claims for any of your covered dependents should be submitted under *your* Subscriber ID number). Northeast Delta Dental will produce an Explanation of Benefits (available through our Benefit Lookup site at nedelta.com) detailing what has been processed under your plan's coverage. You are responsible to pay any outstanding balance directly to the dentist.

Non-Participating Dentists

If you visit a non-participating dentist, you may be required to submit your own claim and pay for services at the time they are provided. Claim forms are available by visiting nedelta.com or by calling Northeast Delta Dental. Payment will be made to you, the Subscriber, unless the state in which the services are rendered requires that assignment of benefits be honored and Northeast Delta Dental receives written notice of such assignment. Payment for treatment performed by a non-participating dentist will be limited to the lesser of the dentist's actual submitted charge or Delta Dental's allowance for non-participating dentists in the geographic area in which services are provided. It is your responsibility to make full payment to the dentist.

Predetermination of Benefits

Northeast Delta Dental recommends that you ask your dentist to submit a *pre-treatment estimate* for any dental work involving costly or extensive treatment plans. Predeterminations help avoid any potential confusion and enable us to help you estimate any out-of-pocket expenses you may incur.

Coordination of Benefits

When an individual covered under this plan has additional group coverage, the Coordination of Benefits (COB) provision described in your Summary Plan Description booklet will determine the sequence and extent of payment. If you have any questions about COB, please contact our Customer Service Department at 1-800-832-5700.

Identification Cards

Two identification cards will be produced and distributed shortly after your initial enrollment. Both cards are issued in your name but can be used by any family member covered under your plan. Any future cards will be issued electronically via our Benefit Lookup site accessible through nedelta.com. You can also use the Delta Dental mobile app and enjoy access to dentist search, claims and coverage, and your ID card.

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Health through Oral Wellness® (HOW®)

A healthy mouth is part of a healthy life, and Northeast Delta Dental's innovative Health through Oral Wellness program (HOW) works with your dental benefits to help you achieve and maintain better oral wellness. HOW is all about YOU because it's based on your specific oral health risk and needs. Best of all, it's secure and confidential. Here's how to get started:

HEALTH through ORAL WELLNESS

1. REGISTER

Go to healththroughoralwellness.com and click on "Register Now."

2. KNOW YOUR SCORE

After you register, please take the free oral health risk assessment by clicking on "Free Assessment" in the Know Your Score section of the website.

3. SHARE YOUR SCORE WITH YOUR DENTIST

The next step is to share your results with your dentist at your next dental visit. Your dentist can discuss your results with you and perform a clinical version of the risk assessment. Based on your risk, you may be eligible for additional preventive benefits.*

*Additional preventive benefits are subject to the provisions of your Northeast Delta Dental policy.

Summary Plan Description Booklet

You will receive a Summary Plan Description booklet shortly after your enrollment or it can be located on your company intranet, if applicable. This Summary Plan Description booklet describes your dental benefits and explains how to use them. Please read it carefully to understand the benefits and provisions of your Northeast Delta Dental plan.

Who is Eligible?

You, your spouse (or Civil Union Partner in states where applicable), your children up to age 26, regardless of student status, and any incapacitated dependent children, regardless of age. If enrolling one eligible dependent, all of your eligible dependents must be enrolled, unless they are covered under another dental program.

Renewability

Your plan will automatically renew for a new twelve (12) month Plan Year if the premium continues to be paid. Premiums are subject to change annually in accordance with advance notice. You or Northeast Delta Dental may choose not to renew this plan upon advance notice. The plan will not be renewed if this dental program is no longer available.

THIS INFORMATION SHOULD BE USED ONLY AS A GUIDELINE. FOR DETAILED INFORMATION ON THE TERMS, CONDITIONS, LIMITATIONS AND EXCLUSIONS, PLEASE REFER TO THE APPROPRIATE SUMMARY PLAN DESCRIPTION.



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

DAVMENT

	ALLOWED	PAYMENT		
Greatest Savings		Delta Dental pays \$400		
In-Network Delta Dental PPO™ 50% benefit Coverage	\$800	You pay \$400		
		You save \$200		
	Dolta Dontal pays \$450			
In-Network Delta Dental Premier® 50% benefit Coverage	\$900	Delta Dental pays \$450		
		You pay \$450		
		You save \$100		
Out-of-Network 50% benefit Coverage Potential balance billing charge	\$720	Delta Dental pays \$360		
		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 plan designs.



- Good oral health can help improve and maintain your overall health. Nearly all systemic diseases including diabetes, leukemia, cancer, heart disease, and kidney disease have oral characteristics that can be detected by the dentist during an oral exam.
- If your dentist uses our clinical risk assessment tool and it determines that you could benefit from additional preventive care to help maintain or improve your oral health, our Health through Oral Wellness® (HOW®) program provides those additional benefits at no additional premium.
- If you share in the cost of your dental coverage, you may be able to contribute via payroll deductions on a pre-tax basis, saving you even more money.
- Adults with dental coverage are more than twice as likely to see their dentist regularly. Insured children are 2.5 times more likely to see the dentist than are uninsured children.
- Keep your teeth. Gum disease and tooth decay lead to tooth loss and are most effectively treated by a dental professional.
- Peace of mind knowing we are there to ensure the care you need is the care you receive.

 Our dental consultants review claims for appropriateness of care.
- Minimize your dental out-of-pocket expenses with access to the largest dentist network with reduced fees.
- 8 Boost your confidence with a healthier, whiter, brighter smile and better breath.
- Coverage for the expected and the unexpected: Our plans cover diagnostic and preventive services; they also cover emergencies and unforeseen restorative needs.
- 10 YOU AND YOUR FAMILY ARE WORTH IT!



Enjoy 24/7 access to your benefit and claim information, print additional identification cards, read your benefit booklet and Explanation of Benefits (EOB), download our mobile app, search for a dentist, register for the Health *through* Oral Wellness® (HOW®) program, and so much more—*all when it's convenient for you!*

At Northeast Delta Dental we strive to give you the best experience possible. That includes technology with access to the information and tools you need, all while supporting our efforts to *go green* by reducing paper waste and our carbon footprint.



Register for HOW*



Download our mobile app



View your benefits/ Find a dentist



View claims and print EOBs



Print ID cards



Read your dental plan booklet



Registration is simple:

- 1. Go to www.nedelta.com and click on PATIENTS
- 2. Click Log In or Register Here to get started!
- **3.** Complete the registration process

Note: You will need your Subscriber ID number (found on your ID card or by calling Customer Service at 1-800-832-5700).



Finding a dentist in your area is easy!

Find a Dentist is located in the top right corner of every page.

Enter some general information about your location and network type, click Search, and a list of dentists serving your area will be displayed.

Note: If you are enrolled in a PPO plus Premier Program, please be sure to search both networks.

Stretch your annual maximum dollars!

If your Northeast Delta Dental plan includes our PPO network, and if you are looking for ways to save money on your dental care and lower your out-of-pocket dental expenses, consider looking for a Northeast Delta Dental PPO dentist for your care.



Health through Oral Wellness® (HOW®)

Health through Oral Wellness® is a program designed to promote better oral health and overall health for Northeast Delta Dental Members. HOW® is all about YOU because it's based on your own specific oral health risks and needs. Best of all, it's secure, confidential, and absolutely FREE.



KNOW YOUR SCORE - After you register, please take the free oral health risk assessment!

SHARE YOUR SCORE WITH YOUR DENTIST: Share your results with your dentist at your next dental visit. Your dentist can discuss your results with you and perform a clinical version of the assessment. Based on your risk, as shown on your clinical assessment, you may be eligible for additional preventive benefits at no cost if your employer participates in the HOW program.*

*Additional preventive benefits are subject to the provisions of your Northeast Delta Dental policy. Only the clinical risk assessment performed by your dentist can determine your eligibility for additional preventive benefits.

EyeMed Vision and Hearing Discount Program

- Save up to 35% off eyewear and 40% off hearing exams.
- With Vision Wellness, choose from any available frame, including quality name-brand products at provider locations, including:



HEALTH through

ORAL WELLNESS®



LENSCRAFTERS'





 Hearing Wellness includes discounted, set pricing on thousands of hearing aids and is offered through Amplifon, the nation's largest independent hearing care network.



Welcome to Health through Oral Wellness® (HOW®)

Extra Benefits—No Additional Charge—For Those Who Need Them

Your Northeast Delta Dental plan includes our industry-leading Health *through* Oral Wellness® (HOW®) program at no additional charge in premium. HOW® provides additional preventive benefits to members who are at risk for oral disease, helping them to achieve better oral health.

Simple and free, HOW® works like this:



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.



STEP 2:

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



STEP 3:

Everyone deserves a healthy smile. For tips on oral wellness and to take a free risk assessment, please visit **HealthThroughOralWellness.com**.

*Additional preventive benefits apply toward the annual maximum and are subject to the provisions of your Northeast Delta Dental policy. Only the clinical risk assessment performed in your dental office can determine your eligibility for additional preventive benefits.

Additional Benefits May Include:

- Extra cleanings
- Fluoride varnish or topical fluoride
- Oral hygiene instruction
- Sealants
- Nutritional counseling
- Tobacco cessation counseling









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.



STEP 2:

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
Caries (Tooth Decay)	Caries Susceptibility Test Child or Adult Cleaning Fluoride Varnish or Topical Fluoride Nutritional Counseling or Oral Hygiene Instruction Sealants	Once per 12 months Combination up to 4 per 12 months ³ Combination up to 4 per 12 months Once per 12 months ¹ Once per 12 months ¹ Once per 3 years ²
Periodontal (Gum) Disease	Adult Cleaning and Periodontal Maintenance Nutritional Counseling or Tobacco Cessation Counseling or Oral Hygiene Instruction	Up to 4 per 12 months ³ 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 Delta Dental at www.nedelta.com or from customer service at 1-800-832-5700.

 $^{^{}m 1}$ Either one nutritional counseling or one oral hygiene instruction is covered in a 12-month period.

² 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.

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

⁴ Either one nutritional counseling, or one oral hygiene instruction, or one tobacco cessation counseling is covered in a 12-month period.



FREQUENTLY ASKED QUESTIONS

Oral Health Risk Assessment and HOW® Registration Process

What is Health through Oral Wellness® (HOW®)?

HOW® is Northeast Delta Dental's unique oral health and wellness program that empowers you to get the most out of your dental benefits and get the care you and your family members need to stay healthy. When you register and complete your personal oral health risk assessment using myDentalScore, we will be able to match oral health information and resources to your individual needs. You may also request that your dentist complete a clinical oral health risk assessment using an online clinical tool called the PreViser® Oral Health Information Suite (OHIS), available to your dentist at no cost. If your oral health scores on the OHIS show you to be at greater risk for tooth decay or gum disease you may qualify for enhanced preventive dental benefits including extra cleanings, fluoride treatments, sealants and periodontal maintenance based on your personal risk for oral disease.

What data is collected and how is it used?

Northeast Delta Dental collects and securely stores your oral health risk assessment data and other personal information to improve our ability to help us communicate with you and your family about oral health. We also use the data to help us improve the benefits we provide to help your dentist deliver the preventive care you need. The information you share with us allows us to communicate with you based on your individual oral health status and personal preferences. Oral health risk assessment scores **submitted by your dentist** may authorize enhanced benefits for members at greater risk for oral diseases like tooth decay and gum disease. Northeast Delta Dental may use de-identified data to generate reports, analyses or educational materials as needed to improve plan designs, wellness offerings and educational materials.

Who can see my risk scores and other information?

Your oral health risk scores are never shared with your employer. Your data is securely stored in a HIPAA compliant data hub called the Prevention Management Console or PMC which is located behind Northeast Delta Dental's firewall. Access to information stored in the PMC is authorized only for the purpose of improving dental plan designs, wellness offerings and educational materials; to provide members with the oral health information and resources they request; and to authorize enhanced



benefits based on the individual's risk for oral disease. As with claims data, information in the PMC can be used to generate trend analyses, reports and educational materials. Data used for these purposes will always be de-identified. Persons who are granted access to see individual oral health data may do so only for the purposes of assisting members in getting information or services needed to maintain or improve their oral health.

I already receive enhanced preventive benefits. Will this change after I re-register?

If you have already had an oral health risk assessment performed by your dentist and are eligible for enhanced benefits, your eligibility for these benefits **will not change**. However, new registrants who have not had a clinical oral health risk assessment performed in the dental office should ask their dentist to complete a clinical oral health risk assessment using PreViser's Oral Health Information Suite (OHIS) to determine their need for enhanced benefits based on risk.

Can my family members register?

You may register your children under the age of 18. After you register you may send the link to family members over the age of 18 to allow them to register.

Can my family members complete the myDentalScore oral health risk assessment?

Yes, adult family members or children age 18 or over can take the oral health risk assessment on their own by going to the link on the **www.nedelta.com** website. You should complete the oral health risk assessment for younger children.

How will I know if I am eligible for additional benefits based on my oral health status?

When your dentist completes the Oral Health Information Suite risk assessment, your dental office can print a report that shows your oral health scores. Based on your individual needs, your dentist will determine the best preventive care treatment plan for you. Your dental office will be able to tell you which enhanced benefits, including fluoride treatment, oral health counseling, sealants and additional dental cleanings, will be covered.

If I am eligible for enhanced benefits based on my oral health scores, do I lose those benefits if I get healthier?

No. Once you are determined to be at greater risk for tooth decay or gum disease, you will always have access to enhanced benefits as long as you continue to be covered under a plan that includes the HOW® program. Your dentist will determine the best way to use those benefits to keep you healthy.

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