

% Paid by  
Delta Dental

- 100% Check-Ups and Routine Teeth Cleaning (Diagnostic and Preventive Services)**
- Routine examinations - two per calendar year.
  - Routine dental prophylaxis (cleaning) - two per coverage year.
  - Bitewing x-rays - two per coverage year up to age 19, and once per coverage year age 19 and over.
  - Full mouth x-rays - one in any five year interval, unless special need is shown.
  - Fluoride applications - two per coverage year up to age 19.
  - Space maintainers (fixed, band type) on primary posterior teeth up to age 14.
  - Dental sealants - for unrestored first and second permanent molars of children up to age 16.
- 80% Cavity Repair/Fillings and Tooth Extractions (Routine and Restorative Services)**
- Pre-formed or stainless steel restorations, restorations such as silver (amalgam) fillings, and tooth-colored (composite) fillings. If a tooth-colored filling is used to restore back (posterior) teeth, benefits are limited to the amount paid for a silver filling.
  - Extractions and other oral surgery.
  - Emergency treatment for relief of pain.
- 80% Root Canals (Endodontics) and Gum and Bone Diseases (Periodontics)**
- Root canals.
  - Treatment of diseases of the tissues supporting the teeth.
- 50% Crowns, Bridges, Dentures, and Implants (Major Services)**
- Crowns when teeth cannot be restored with a filling material.
  - Prosthetics - bridges, partial dentures, complete dentures, and implants.
- None Braces (Orthodontics)**
- Treatment necessary for the proper alignment of teeth.

**Deductible:** \$25 per person per calendar year not to exceed \$75 per family. The deductible does not apply to check-ups and teeth cleanings.

**Annual maximum benefit:** \$1,000 per person per calendar year. All services are subject to the annual maximum benefit and will not be paid if the annual maximum benefit has been reached.

**Monthly rates:**      **Single \$34.50**      **Family \$88.30**

#### **PLAN REQUIREMENTS**

This dental plan is based on the employer paying 100% of the single cost as an employee benefit. All eligible employees must be enrolled. Each employer determines the length of employment and number of hours required for an employee to be eligible.

See next sheet for additional benefits.

## **SMILE SMART FOR YOUR HEALTH**

Delta Dental of South Dakota's Smile Smart for Your Health enhanced benefits program integrates medical and dental care - customizing benefits at the individual level by offering services to people with specific health conditions that can be positively affected by additional oral health care. Delta Dental enrollees with diabetes, pregnancy, periodontal disease, high-risk cardiac conditions, kidney failure/dialysis, suppressed immune systems or cancer-related chemotherapy and/or radiation all qualify for additional services. The program also includes benefits to aid in the fight against oral cancer. If you have any of these conditions, let your dentist know and they will note it on your claim form.

*\* Note: Periodontal maintenance cleanings are covered under the "Root Canals and Gum and Bone Diseases" category, not the "Check-Ups and Routine Teeth Cleaning" category. Your dentist may or may not charge for exams related to added periodontal maintenance or cleanings. The additional exams are not included with the enhanced benefits of additional periodontal maintenance or cleanings.*

### **Benefits for People with Periodontal (Gum) Disease**

Enrollees with periodontal disease are eligible for up to four teeth cleanings, either prophylaxis or periodontal maintenance, in a benefit year. Enrollees are also eligible for two applications of fluoride varnish in a benefit year.

### **Benefits for People with Diabetes**

Enrollees with diabetes are eligible for up to four teeth cleanings, either prophylaxis or periodontal maintenance, in a benefit year.

### **Benefits for Pregnant Women**

Pregnant enrollees are eligible for one additional prophylaxis or periodontal maintenance visit during the time of the pregnancy.

### **Benefits for People with High-Risk Cardiac Conditions**

Enrollees with high-risk cardiac conditions are eligible for up to four teeth cleanings, either prophylaxis or periodontal maintenance, in a benefit year. Conditions include: a history of infective endocarditis; certain congenital heart defects such as having one ventricle instead of the normal two; individuals with artificial heart valves; heart valve defects caused by acquired conditions like rheumatic heart disease; hypertrophic cardiomyopathy, which causes abnormal thickening of the heart muscle; individuals with pulmonary shunts or conduits; and mitral valve prolapse with regurgitation (blood leakage).

### **Benefits for People with Kidney Failure or Who are Undergoing Dialysis**

Enrollees with kidney failure or who are undergoing dialysis are eligible for up to four teeth cleanings, either prophylaxis or periodontal maintenance, in a benefit year.

### **Benefits for People Undergoing Cancer-Related Chemotherapy and/or Radiation**

Enrollees who are undergoing cancer-related chemotherapy and/or radiation are eligible for up to four teeth cleanings, either prophylaxis or periodontal maintenance, in a benefit year. Enrollees are also eligible for two applications of fluoride varnish in a benefit year.

### **Benefits for People with Suppressed Immune Systems**

Enrollees who have suppressed immune systems due to HIV- positive status, organ transplant, and/or stem cell (bone marrow) transplant are eligible for up to four teeth cleanings, either prophylaxis or periodontal maintenance, in a benefit year. Enrollees are also eligible for two applications of fluoride varnish in a benefit year.

### **Benefits to Help in the Fight Against Oral Cancer**

The brush biopsy is a powerful tool in the early detection of oral cancer/precancerous cells. The procedure is used to evaluate unexplained tiny white and red lesions.

To find a participating Delta Dental dentist go to [www.deltadentalsd.com](http://www.deltadentalsd.com). Under the "Looking for a Dentist?" section click on "Dentist Search". Then select "Delta Dental Premier" and enter your city or zip code.