

DENTAL PLANS

The NYSUT Member Benefits Trust endorses group dental plans from Delta Dental of New York, Inc.,¹ which is part of the largest dental benefits system in the U.S.² The relationship between the Member Benefits Trust and Delta Dental gives you the freedom to choose from PPO and fixed co-payment products.

Delta Dental PPO™

With a PPO plan, costs are shared for covered dental services. Delta Dental pays a percentage of the bill, and enrollees pay the rest. While enrollees will usually save the most with a PPO dentist, they can visit any dentist they choose across the U.S. With nearly 80% of practicing dentists in Delta Dental's networks, there's a good chance enrollees are already visiting a network provider.³ As long as enrollees visit a network dentist, there are no claim forms to complete. Plus, there's no pre-authorization needed for specialty care.

DeltaCare® USA

DeltaCare USA is a co-pay plan that works similar to a dental HMO. Enrollees must visit their selected DeltaCare USA dentist to receive care. No claim forms are required for care from selected dentists; co-payment costs for covered services are predefined.

When enrollees visit the dentist, they simply pay their co-payment. If enrollees need specialty care, their assigned dentist will coordinate services. If dental emergencies occur when enrollees are outside their service area, they are covered with an emergency services provision.

Visit deltadentalins.com/business to learn more about Delta Dental's plans.

Your Plan

With more than 60 years of expertise in designing and implementing labor union plans, Delta Dental can help select the plan design, funding options, and features to meet your dental benefits objectives. You can customize a plan that matches your existing group dental plan or design something new.



Delta Dental can help you choose:

- The product and plan features that NYSUT members will value most
- Fully-insured or self-insured funding (ASO/ASC)
- Voluntary or employer-paid contribution options
- Different fee basis options for non-participating dentists (PPO only)

Plan Enhancements:

Fully-insured groups covered under NYSUT Member Benefits Trust-endorsed Delta Dental Group Dental Plans receive additional plan enhancements at no additional cost. These enhancements are paid for by the plan's reserves held by the NYSUT Member Benefits Trust. The enhancements include:

- 1) D&P Maximum Waiver®: Diagnostic and preventive services such as preventive exams, cleanings, and related x-rays do not count toward the annual maximum, leaving more dollars for other services.
- 2) Dependent age: The age for dependent coverage is 26 regardless of student status.

Benefits administrators are supported by:

- A union-specialized account team
- Open enrollment specialists to help educate enrollees about plans
- Comprehensive financial and utilization reports to track plan performance
- Online tools to manage and track payments and update eligibility in real-time
- A wealth of shareable wellness resources to keep enrollees healthy

Enrollees are supported by:

- Easy-to-use online features to check benefits and eligibility, estimate costs, and find a dentist
- *Grin!*, an engaging oral health e-magazine
- Product-specific customer service representatives – 99% of inquiries resolved on the first call⁴
- Quick and accurate claims turnaround – more than 99% accuracy rate

DENTAL PLANS (continued)

Get a Group Quote

For a quote on a customized plan or more information about group dental options, please contact Bob Seward, Delta Dental Sales Account Executive, at rseward@delta.org or **518-322-5469**.

In order to obtain the best pricing, please provide:

- A group census with the number of individual and family enrollees in the group
- A copy of the plan booklet (for groups with existing coverage) that details the benefits, limitations, frequencies, and covered services
- Current premiums and/or administrative fees
- One to two years of prior dental claims experience, including provider utilization (two years preferred)

A copy of your last month's dental bill will capture census information, premiums, and administrative fees. Please include the source of the plan funding – District/Employer or Benefit Trust Fund.

Delta Dental PPO Group Dental Plans are provided and administered by Delta Dental of New York, Inc. DeltaCare USA plans are underwritten by Delta Dental of New York, Inc. and administered by Delta Dental Insurance Company.

- ¹ Delta Dental of New York, Inc. is the underwriter and administrator of NYSUT Member Benefits Trust-endorsed PPO group dental plans. DeltaCare USA is underwritten in New York by Delta Dental of New York, Inc. Delta Dental Insurance Company acts as the DeltaCare USA administrator. These companies are financially responsible for their own products. Delta Dental of New York, Inc. is part of a Delta Dental enterprise that includes Delta Dental of California, Delta Dental of Pennsylvania, Delta Dental of New York, Inc., Delta Dental Insurance Company, and its enterprise affiliates. These companies are members, or affiliates of members, of the Delta Dental Plans Association (DDPA), a network of 39 Delta Dental companies.
- ² IBIS Associates 2016 Group Dental Market Report.
- ³ Delta Dental Unique Dentists Network Penetration Report, Dec. 2017
- ⁴ Delta Dental Annual Report, 2017, for enterprise companies

Delta Dental Group Plans are NYSUT Member Benefits Trust (Member Benefits)-endorsed programs. Member Benefits has an endorsement arrangement of 2% of all premiums paid to Delta Dental by NYSUT member groups; 0.5% of all claims paid by those groups with an Administrative Services Only (ASO) dental program; or 2% of all premiums paid to Delta Dental by NYSUT member groups with a prepaid dental program. All such payments to Member Benefits are used solely to defray the costs of administering its various programs and, where appropriate, to enhance them.

The Insurer pools the premiums of Member Benefits participants who are insured for the purposes of determining premium rates and accounting. Coverage outside of these plans may have rates and terms that are not the same as those obtainable through Member Benefits. The Insurer or Member Benefits may hold premium reserves that may be used to offset rate increases and/or fund such other expenses related to the plans as determined appropriate by Member Benefits. Member Benefits acts as your advocate; please contact Member Benefits at 800-626-8101 if you experience a problem with any endorsed program.