# 2018–2019 STUDENT DENTAL PLANS





**Preventive Plan:** Included in the Student Health Benefit Plan for all primary members (students). This plan is not subject to annual maximums or deductibles. It covers routine services at 100% and specific nonsurgical specialized treatment of the mouth at 80%.

Group #765351 - Preventive/Periodontics Plan, Buy-Up Plan with Restorative Services, and VSDP. **Buy-Up Plan:** This plan includes the preventive plan benefits but also adds services such as surgery, crowns, prosthetics and others at 50%. It includes a \$1,200 annual per person maximum, and a \$25 per person deductible. The cost of the plan is \$326. For students who are enrolled both fall and spring semesters, the premium will be billed in two installments of \$163.

**Voluntary Student Dental Plan (VSDP):** The VSDP includes benefits on both the Preventive Plan and the Buy-Up Plan. This plan is for students who are not on the Student Health Benefit Plan. The cost of the plan is \$496. For students who are enrolled for both fall and spring semesters, the premium will be billed in two installments of \$248.

Network(s)	Preventive/ Periodontics Plan	Buy-Up Plan with Restorative Services & VSDP
<b>Plan Year Maximum - Per Person</b> 9/1/18 – 8/31/19 Diagnostic and preventive services are excluded from the Plan Year Maximum	No annual maximum	\$1,200 Per person
<b>Deductible - Per Person</b> 9/1/18 - 8/31/19 Diagnostic and preventive services are excluded from the Plan Year Maximum	No deductible	\$25 per person
Covered Services	Benefit Coverage	Benefit Coverage
<ul> <li>Preventive services:</li> <li>(These are called Diagnostic &amp; Preventive Services)</li> <li>Exams</li> <li>Cleanings</li> <li>X-rays</li> <li>Sealants</li> </ul>	100%	This service is not subject to the \$1,200/ year annual maximum
<ul> <li>Nonsurgical specialized treatment of the mouth:</li> <li>(This is called Nonsurgical Periodontics)</li> <li>Careful plaque removal (called scaling and root planing)</li> <li>Custom-fit mouth trays to deliver medication (called tray delivery systems)</li> </ul>	80%	80% *Please note this service will be subject to the \$1,200 annual plan year maximum for the Buy-Up with Restorative/VSDP Plan
Surgical specialized treatment of the mouth (This is called Surgical Periodontics)	This plan does not cover these services	80%
<ul> <li>Emergency treatment and fillings:</li> <li>(These are called Basic Services)</li> <li>Emergency treatment for pain relief</li> <li>Silver fillings</li> <li>White fillings</li> </ul>	This plan does not cover these services	80%
<ul> <li>Treatment of the inner tooth:</li> <li>(This is called Endodontics)</li> <li>Root canal therapy on permanent teeth</li> <li>Pulpotomies on baby teeth for dependent children</li> </ul>	This plan does not cover these services	50%
<ul><li>Oral surgery:</li><li>Surgical and nonsurgical tooth extractions</li><li>All other covered oral surgery</li></ul>	X This plan does not cover these services	50%
Major restorative services: • Crowns	X This plan does not cover these services	50%
<ul> <li>Prosthetic repairs and adjustments:</li> <li>Denture adjustment and repairs</li> <li>Bridge repair</li> </ul>	X This plan does not cover these services	50%
<ul><li>Prosthetics:</li><li>Full and partial dentures</li><li>Bridges</li></ul>	X This plan does not cover these services	50%

This is a summary of benefits only and does not guarantee coverage. For a complete list of covered services and limitations/exclusions, please refer to the Dental Benefit Plan Summary.

\*Dentists who have signed a participating network agreement with Delta Dental have agreed to accept the maximum allowable fee as payment in full. Non-participating dentists have not signed an agreement and are not obligated to limit the amount they charge; the member is responsible for paying any difference to the non-participating dentists.

## **Insurance Terms Defined**

#### Annual maximum:

The maximum amount a dental plan will pay toward your dental care from 9/1/18 - 8/31/19.

#### Deductible:

A set dollar amount you are responsible for paying toward services before your dental plan begins to pay for covered services.

#### **Preventive Services:**

These are exams, cleanings, X-rays and sealants. They are also called Diagnostic & Preventive Services.

#### Learn more at DeltaDentalMN.org/StudentDentalPlan





## Seeing an in-network dentist means saving even more money.

Use our Find a Dentist tool to ensure that your provider is part of our networks: deltadentalmn.org/find-a-dentist

Twin Cities Students: In-network, convenient care is available on campus with the U of M Faculty Dentists (612-626-9665) and at the Boynton Health Dental Clinic (612-624-9998).

## Visit us: DeltaDentalMN.org/StudentDentalPlan



## **Dental Insurance 101**

Dental insurance can get complicated – that's why we created our 101 webpage, featuring a glossary of common dental insurance terms and tips for your visit.



#### Mobile App

Lost your insurance card or sick of carrying it around? The Delta Dental Mobile App brings your ID card right to your phone for easy access at the dentist's office. You also get access to dentist search, claims and coverage, and even a toothbrush timer.



#### **Create Your Account**

You can manage your account, review your benefits and claims, see your history and more all on the online member portal.



#### Language Assistance

Translation assistance is available to you if needed. Please visit: **DeltaDentalMN.org/language-assistance** 



## Contact Us

If you have questions on:

- Eligibility
- Enrollment
- Billing

Contact: Office of Student Health Benefits 612-624-0627 umshbo@umn.edu shb.umn.edu

#### If you have questions on:

- Benefits
- Coverage and services
- In-network providers

Contact: Delta Dental of Minnesota Customer Service 651-406-5916 or 800-553-9536 (toll-free) Monday-Friday, 7 a.m.-7 p.m. CST

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