



Delta Dental of Colorado Individual & Family Dental Plans

Delta Dental of Colorado is the state's leading dental benefits company and the only one based in Colorado. Unlike most carriers, we focus on just one thing — dental insurance. We provide our more than one million members with the convenience of local customer service backed by a statewide network of dental providers. In addition, we are a nonprofit company with a mission to improve oral health in Colorado. More than half of what we earn goes back to our local community.

We offer affordable, comprehensive dental plans to help you stay healthy and smiling. With our network of 2,500 Delta Dental PPO™ dentists in more than 4,200 locations across the state, you get more choice and lower costs. That will help your benefits go further because you will pay less for dental care.

▶ HOW TO FIND A DENTIST

There are several easy ways to find a PPO dentist:

- Website: Log on to our website at deltadentalco.com and use the Find a Dentist search tool. Search by city, state, or zip code for a listing in your area.
- Mobile App: With Delta Dental's free mobile app, you can search for dentists, upload an ID card, and look at benefits coverage and claims. Download it today for iPhone or Android.
- Phone: Call us at 1-800-610-0201. Follow the prompts to find a dentist.

▶ CONTACT US

We have local customer service agents to answer questions about your benefits.

- Toll-free: 1-800-610-0201 Monday through Friday, 8 a.m. to 6 p.m. (Mountain Time)
- Email: customer_service@ddpco.com

Thank you for considering Delta Dental of Colorado for your dental insurance plan.



Delta Dental of Colorado is a Qualified Dental Plan in the Connect for Health Colorado™ marketplace.

See reverse for plan options and details.

deltadentalco.com



PLAN OPTIONS

	Plains Plan	Foothills Plan	Alpine Plan	Summit Plan
Annual Maximum, Adult or Adult Dependent	\$750	\$1,000	\$1,000	\$2,000
Annual Maximum, Children	None	None	None	None
Out-of-pocket Maximum, 1 Child	\$350	\$350	\$350	\$350
Out-of-pocket Maximum, 2+ Children	\$700	\$700	\$700	\$700
Deductible, Individual	\$50	\$50	\$50	\$50
Deductible, Family of 2	\$100	\$100	\$100	\$100
Deductible, Family of 3+	\$150	\$150	\$150	\$150

Covered Services

PREVENTIVE SERVICES

Oral Exams & Cleanings Limited to 1 in 6 months	You pay 20% of procedure cost. Deductible does not apply.	You pay 0% of procedure cost. Deductible does not apply.	You pay 20% of procedure cost. Deductible does not apply.	You pay 0% of procedure cost. Deductible does not apply.
X-rays Bitewing X-rays limited to 1 in 12 months. Full-mouth X-rays limited to 1 in 60 months.				
Fluoride Treatment Limited to 2 in 12 months. Children only.				
Sealants Limited to 1 per tooth in 36 months. Children only.				

BASIC SERVICES (6-MONTH WAITING PERIOD)

Fillings	You pay 50% of procedure cost after deductible is met.	You pay 40% of procedure cost after deductible is met.	You pay 40% of procedure cost after deductible is met.	You pay 30% of procedure cost after deductible is met.
Simple Extractions				

TYPE IIIA MAJOR SERVICES (12-MONTH WAITING PERIOD)

Complex Oral Surgery	You pay 50% of procedure cost after deductible is met.	You pay 40% of procedure cost for children after deductible is met.	You pay 50% of procedure cost after deductible is met.	You pay 50% of procedure cost after deductible is met.
Denture Repair, Relines & Rebases				
Endodontics (Root Canals)				
Periodontics (Gum Disease Treatment)	This is not a covered benefit for adults or adult dependents.	This is not a covered benefit for adults or adult dependents.		

TYPE IIIB MAJOR SERVICES (24-MONTH WAITING PERIOD)

Implants	You pay 50% of procedure cost for children after deductible is met.	You pay 40% of procedure cost for children after deductible is met.	You pay 50% of procedure cost after deductible is met.	You pay 50% of procedure cost after deductible is met.
Prostodontics (Dentures & Bridges)				
Special Restorative (Crowns, Inlays & Onlays)	This is not a covered benefit for adults or adult dependents.	This is not a covered benefit for adults or adult dependents.		

All maximums are on a calendar-year basis. Limitations are per person. Children are covered through the end of the month in which they turn 19. Adult dependents are covered from the age of 19 through the end of the month in which they turn 26.

This chart provides only a brief description of services covered. The benefit booklet will provide a more complete explanation of coverage, including limitations and exclusions. If there are differences between this schedule of benefits and the benefit booklet, the benefit booklet will govern.