



## State of Texas Dental Choice

The State of Texas Dental Choice Plan<sup>SM</sup> is a preferred provider organization (PPO) dental insurance plan. You can see any dentist you want, but you will pay less if you go to a dentist in one of two Delta Dental networks:

- Delta Dental PPO
- Delta Premier

All Delta Dental PPO and Delta Premier dentists are in-network providers. You get the same coverage in either network, but you may pay less for covered services in the Delta Dental PPO network. Delta Premier dentists can charge higher rates for the same covered services.

Benefits are available in the United States, Canada and Mexico, if you live in the United States.

## DeltaCare<sup>®</sup> USA

### DeltaCare USA dental health maintenance organization

This is a dental health maintenance organization (DHMO) dental insurance plan.

- Coverage applies only to dentists in the Texas service area. Before you enroll, make sure there is a DeltaCare USA network dentist in your area.
- You must choose a primary care dentist (PCD) from a list of approved providers. You and your enrolled dependents can choose different PCDs.
- Services from participating specialty dentists cost 25% less than the dentists' usual charges when specialty care is coordinated by your PCD.

### What is a “smart” ID card?

To keep costs low, active employees who sign up for GBP dental insurance will not get an ID card, and participating Delta dentists shouldn't require them.

If you would like a card, you can download a virtual ID card to your smartphone through the Delta Dental app. You can also download and print your ID information from [www.ERSdentalplans.com](http://www.ERSdentalplans.com) or call Delta Dental toll-free at (888) 818-7925 (TTY: 711) and they will mail a paper copy to you.

Your covered dependents cannot access the Delta Dental app, and their names aren't listed on the ID card. Providers can verify your dependent's coverage using your dependent's name or your name and the plan ID number.

## Dental plans comparison chart

This chart is a summary of benefits in the two dental insurance plans. See plan booklets for actual coverage and limitations.

Delta Dental administers both plans. Before starting treatment, discuss the treatment plan and all charges with your dentist.

	State of Texas Dental Choice Plan PPO – In-Network	State of Texas Dental Choice Plan PPO – Out-of-Network	DeltaCare USA DHMO (Services from participating PCDs only)
<b>Dentists</b>	<b>In-network/participating dentist</b>	<b>Out-of-network/non-participating dentist*</b>	You must select a primary care dentist (PCD).  NOTE: Not all participating dentists accept new patients. Dentists are not required to stay on the plan for the entire year.
<b>Deductibles</b>	Preventive: Individual-\$0; Family-\$0  Combined Basic/Major: Individual-\$50; Family-\$150  Orthodontic services: no deductible	Preventive: Individual-\$50; Family-\$150  Combined Basic/Major: Individual-\$100; Family-\$300  Orthodontic services: no deductible	None
<b>Copays/ coinsurance</b>	Preventive and Diagnostic Services: None.  Basic Services: 10% coinsurance after meeting the Basic Services deductible.  Major Services: 50% coinsurance after meeting the Major Services deductible.  There is no charge for anything over the allowed amount.  After reaching the Maximum Calendar Year Benefit, the participant pays 60% until January 1.	Preventive and Diagnostic Services: 10% coinsurance after meeting the Preventive and Diagnostic deductible.  Basic Services: 30% coinsurance after meeting the Basic Services deductible.  Major Services: 60% coinsurance after meeting the Major Services deductible.  Participants may be required to pay the difference between the allowed amount and billed charges.  Once the Maximum Calendar Year Benefit is reached, the participant pays 100% until January 1.	PCD: Copays vary according to service and are listed in the “Schedule of Dental Benefits” booklet.  Specialty dentistry: 75% of the dentist’s usual and customary fee when specialty care is coordinated by the PCD. DHMO pays nothing.
<b>Maximum calendar year benefits</b>	\$2,000 per covered individual (includes orthodontic extractions).	\$2,000 per covered individual (includes orthodontic extractions).	Unlimited
<b>Maximum lifetime benefit</b>	\$2,000 per covered individual for orthodontic services.	\$2,000 per covered individual for orthodontic services.	Unlimited
<b>Average cost of cleaning / oral exams</b>	Up to two cleaning/oral exams per calendar year allowed.	10% of the allowed amount after deductible is met.  Up to two cleaning/oral exams per calendar year allowed.	Vary according to service and are listed in the “Schedule of Dental Benefits” booklet.  Up to two cleaning/oral exams per calendar year allowed.
<b>Orthodontic coverage</b>	50% of the allowed amount.	50% of the allowed amount.  Participants may be required to pay the difference between the allowed amount and billed charges.	Orthodontic services performed by a general dentist listed in the directory with a “0” treatment code: child-\$1,800; adult-\$2,100.  If care is coordinated by the PCD, participant pays 75% of specialist’s fee. Plan pays \$0.

\*In the State of Texas Dental Choice Plan PPO, deductibles and annual maximums are per calendar year. Non-participating dentists can bill for charges above the amount covered by Delta Dental. Visit a participating dentist to ensure you do not have to pay additional charges above the amount covered by Delta Dental.