

IAFF Seattle DHMO

Group# 04204

DeltaCare® DHMO Plan Benefit Summary

Effective Date	January 1, 2025
Benefit Period	January 1, 2025 – December 31, 2025
Benefit Period Maximum	No Maximum
Benefit Period Deductible	No Deductible
Orthodontia Adult & Children Lifetime Maximum (Per Person) (Night guards are not covered)	50% \$2,000 Coverage can be provided by any licensed orthodontist.
Emergency Services (Immediate pain relief)	All emergency services must be coordinated through your selected DeltaCare dentist.

	DeltaCare Dentist
	Your Copay
Class I - Diagnostic and Preventive	
Exams, Cleanings, Fluoride, X-rays and Sealants	Covered at 100% when performed by the assigned DeltaCare dentist. (Subject to plan exclusions and limitations.)
Class II - Basic	
Restorations, Endodontics, Periodontics and Oral Surgery	Covered at 100% with a \$10 copayment per visit. (Note: If a posterior tooth is restored with a composite (white) filling, the plan will cover the cost up to the amount allowed for a tooth to be restored by an amalgam (silver) filling. Any difference in cost will be your responsibility.)
Class III - Major	
Crowns, Dentures, Partials and Bridges (Implants are not covered under the dental plan) DDWA recommends submitting surgical implant charges to your medical carrier as you may have coverage available under your medical plan	A \$10 Copayment will be required per visit. Additional copayments will also apply.

Please Note: This is a brief summary of available benefits for comparison purposes only and does not constitute a contract. Once enrolled in a plan, you receive a benefits booklet which provides more details of your DeltaCare Plan. Please feel free to call our customer service department or visit our website at **DeltaDentalWA.com/Boeing** if you have any questions.

Your DeltaCare plan only covers services provided by your Primary Care Dentist (PCD), also known as your Primary Care Provider (PCP), or a PCD-referred specialist.

Here's some important information to help you use your benefits:

Your DeltaCare® managed care dental plan, administered by Delta Dental of Washington, makes taking care of your smile easy and predictable. Your Primary Care Dentist (PCD), also known as your Primary Care Provider (PCP), manages all your care.

How to Use your DeltaCare Program

When you enroll, you will need to choose a Primary Care Dentist from the list of contracted DeltaCare Providers. All family members may choose their own Primary Care Provider. You must have a PCD; if you don't select one, we will assign a PCD for you.

Schedule your appointment

After you've enrolled, you will receive the address and phone number of your PCD along with your ID cards. Contact your PCD to make an appointment.

It's important that you receive all your dental care from your PCD or a PCD-referred specialist. Your DeltaCare plan only covers services provided by your PCD or a PCD-referred specialist.

Visiting your PCD

Your PCD manages all your dental care needs. If you need specialty care, your PCD needs to coordinate the referral.

Visiting non-DeltaCare dentists

You're responsible for any costs related to services provided by non-DeltaCare dentists.

Changing your PCD

You can change your Primary Care Dentist whenever you want. First, be sure to confirm your new dentist is a DeltaCare PCD by checking the DeltaCare network listings at <u>DeltaDentalWA.com/Boeing</u>. Then you must call us in advance of the change to tell us the name of your new PCD. If you make the request before the 20th of the month, you can start seeing your new dentist on the 1st of the next month.

Finding a DeltaCare Dentists

Visit <u>DeltaDentalWA.com/Boeing</u> and use our Find a Dentist tool to find a DeltaCare network dentist near you. Be sure to select the DeltaCare network to filter your search results. You can select a different PCD for each member of your family.

Dental Emergencies

Your PCD will help you access emergency care, 24 hours a day, every day of the year.

Confirmation of Treatment and Cost (Formerly called Predeterminations)

When your dentist recommends treatment, we encourage you to ask them to submit a Predetermination. Once submitted, you'll receive a Confirmation of Treatment and Costs (Confirmation). A Confirmation details your dentist's specific treatment plan, what your benefits pay, and gives you an accurate out-of-pocket estimate.

Have a question?

Give us a call at 877.289.5114 or text us at 833.604.1246, Monday – Friday from 6 am to 5 pm, Pacific Time. We're happy to help.