State of New Mexico Dental Plan

Administered by Delta Dental of New Mexico

Your Delta Dental Network Just Got Larger

Effective January 1, 2022, the State of New Mexico has enhanced the dental plan network to the Delta Dental PPO[™] POS network. The Delta Dental PPO POS network is unique because it features two different Delta Dental national provider networks – two "in-network" choices in a single plan. Anytime services are needed, members can choose a dentist from either network and receive the in-network benefits.

Our Delta Dental PPO dentists have agreed to the deepest discounts for our members for covered services. However, if you go to a dentist who doesn't participate in Delta Dental PPO, you can still save money if your dentist participates in the Delta Dental Premier® network. Like our Delta Dental PPO dentists, Delta Dental Premier dentists agree to accept Delta Dental's fee determination with no balance billing. You would be responsible for your co-insurance, deductible or any non-covered services if applicable.

DELTA DENTAL NETWORKS	Delta Dental PPO Delta Dental Premier	 No balance billing on covered services Lowest out-of-pocket costs for this Plan Payment is based on Delta Dental PPO Maximum Approved Fees Dentists file claims for member No balance billing on covered services Higher out-of-pocket costs for this Plan Payment is based on Delta Dental Premier Maximum Approved Fees Dentists file claims for member
OUT OF NETWORK	Out-of-network dentist	 May be balance billed Highest out-of-pocket costs for this Plan No discounts May need to file own claims

Example of how the PPO Point of Service network can save you money

As shown below, your lowest out-of-pocket costs result from going to either a Delta Dental PPO or Delta Dental Premier dentist.

		DELTA DENTAL PPO DENTIST	DELTA DENTAL PREMIER DENTIST	OUT-OF-NETWORK DENTIST
CROWN	Submitted fee	^{\$} 1,300	^{\$} 1,300	^{\$} 1,300
	Maximum allowed fee	^{\$} 835	^{\$} 1068	^{\$} 630
	Coverage level	60%	60%	35%
	Amount Delta Dental pays	^{\$} 501	^{\$} 640.80	^{\$} 220.50
	AMOUNT YOU PAY	^{\$} 334	^{\$} 427.20	^{\$} 1079.50

Contact

Phone: (505) 855-7111 or toll-free (877) 395-9420 Email: <u>customerservice@deltadentalnm.com</u> Web: <u>www.deltadentalnm.com</u> Mobile App: Download the Delta Dental mobile app on the App Store (iOS) or Google Play (Android)

Access 24/7

Delta Dental's automated voice response system is available 24/7 to help you with topics such as benefit/eligibility verification, requesting an ID card, provider directories (fax, voice, or email), and checking claim/pre-treatment estimate status.



Delta Dental PPO [™] POS Network – 2022 – Dental Plan Administered by Delta Dental of New Mexico					
Benefit Category	In Network: Delta Dental PPO [™] and Delta Dental Premier [®] Network	Out of Network:*			
Diagnostic and Preventive Services					
Oral Exams (two routine per calendar year) Routine or Periodontal Cleanings (two per calendar year or up to two additional for specified at-risk medical conditions) Radiographic Images (full mouth: once every five years; bitewings: twice in a calendar year) Topical Fluoride (through age 18, twice per calendar year) Emergency Treatment for Relief of Pain Sealants (through age 15, permanent molars only, three year limitation) Space Maintainers (through age 18, five year limitation)	Plan Pays 100% You Pay 0%	Plan Pays 100% You Pay 0%*			
Basic Services					
Amalgam or Composite Fillings Stainless Steel Crowns (primary teeth only) Oral Surgery (maxillofacial surgical procedures of the oral cavity, including extractions) Endodontics (pulp therapy and root canal filling) Periodontics (non-surgical and surgical treatment of gum disease) Repairs to Crowns, Implants, Onlays, Bridges, and Partial or Complete Dentures Adjustments to Partial or Complete Dentures General Anesthesia (intravenous sedation and general anesthesia, when Dentally Necessary and administered by a licensed Provider for a covered oral surgery procedure)	Plan Pays 80% You Pay 20%	Plan Pays 55% You Pay 45%*			
Major Services					
Prosthodontic procedures for construction of fixed bridges, partials, or complete dentures Implants (specified services, including repairs, and related prosthodontics, subject to clinical review/approval) Onlays, Crowns, and Cast Restorations (when teeth cannot be restored with amalgam or composite resin restorations)	Plan Pays 60% You Pay 40%	Plan Pays 35% You Pay 65%*			
Orthodontic Services					
Children starting treatment up to 18th birthday	Plan Pays 75% up to a \$2,000 lifetime maximum You Pay 25%* Plan Pays 60% up to a				
Adults, starting treatment 18 and over	\$1,750 lifetime maximum You Pay 40%*				
Deductibles and Maximums					
Calendar Year Deductible—Jan. 1 – Dec. 31. (Does not apply to Diagnostic and Preventive Services or Orthodontic Services)	You Pay \$50 per Enrolled Person \$150 per Family				
Calendar Year Maximum—Jan. 1 – Dec. 31. (Excludes expenses for Orthodontic Services)	Plan Pays up to \$1,750 per Enrolled Person				

*Balance billing applies. Non-Participating Providers may bill you above the Non-Participating Maximum Approved Fees they receive from Delta Dental. You will have the highest out-of-pocket costs when you visit a Non-Participating Provider. In addition, Non-Participating Providers have not agreed to Delta Dental's in-network protections for Enrollees. See the Summary of Dental Plan Benefits for more information on networks and cost sharing.

READ YOUR PLAN CAREFULLY - THIS BENEFITS SUMMARY PROVIDES A VERY BRIEF DESCRIPTION OF THE IMPORTANT FEATURES OF YOUR PLAN. THIS IS NOT THE INSURANCE CONTRACT. YOUR FULL RIGHTS AND BENEFITS ARE EXPRESSED IN THE ACTUAL PLAN DOCUMENTS THAT ARE AVAILABLE TO YOU UPON YOUR REQUEST TO US.