



# Dental Benefits Glossary

# Table of Contents

---

Dental Benefits Terms..... 4-16

**A**

Annual Maximum..... 5

**B**

Balance Billing..... 5  
 Benefit Year..... 5  
 Benefit Levels..... 6  
 • Preventive Services..... 6  
 • Basic Services..... 6  
 • Major Services..... 6  
 • Emergency Services..... 6  
 • Orthodontic Services..... 6

**C**

Certificate of Coverage..... 5  
 Claim/Claim Form..... 7  
 Coinsurance..... 7  
 Copayment..... 7  
 Covered Service..... 7  
 Coordination of Benefits..... 8  
 Credentialing..... 8

**D**

Deductible..... 8  
 Dependents..... 8  
 Dual Coverage..... 9

**E**

Effective Date..... 9  
 Enrollee..... 9  
 Exclusions..... 9  
 Explanation of Benefits (EOB)..... 10

**F**

Fee Schedule..... 10

**G**

Group..... 10

**H**

HIPAA..... 10

**I**

In-Network Dentist..... 11

**L**

Lifetime Maximum..... 11  
 Limitations..... 11

**M**

Maximum Benefit..... 11  
 Maximum Plan Allowance (MPA)..... 12  
 Member..... 12

# Table of Contents (cont'd)

## N

National Provider Identifier (NPI).....	12
Network.....	12
Non-Participating Dentist.....	13

## O

Open Enrollment.....	13
Optional Services.....	13
Out-of-Network Dentist.....	13

## P

Participating Dentist.....	13
Plan Year.....	14
Protected Health Information (PHI).....	14
Pre-Determination.....	14
Pre-Established Fee.....	14
Premium.....	14
Pre-Treatment Estimate.....	15
Processing Policies.....	15
Provider.....	15

## S

Subscriber.....	15
-----------------	----

## T

Termination date.....	16
-----------------------	----

## W

Waiting Period.....	16
---------------------	----

## Plan Types..... 17-19

DHMO (Dental Health Maintenance Organization).....	18
Discount Card/Plan.....	18
Individual and/or Family Plan.....	18
Managed Fee-for-Service.....	19
PPO (Preferred Provider Organization).....	19
Voluntary.....	19

## Dental Professionals..... 20-22

Endodontist.....	21
General Dentist.....	21
Hygienist.....	21
Oral Maxillofacial Radiologist.....	21
Oral Pathologist.....	21
Oral Surgeon.....	21
Orthodontist.....	22
Pediatric Dentist.....	22
Periodontist.....	22
Prosthodontist.....	22
Specialist.....	22



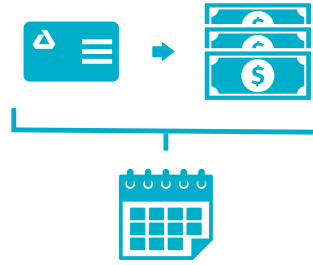
# Dental Benefits Terms

# A

---

## Annual Maximum

The most a dental plan will pay toward your dental care within a specific period, usually a calendar year.

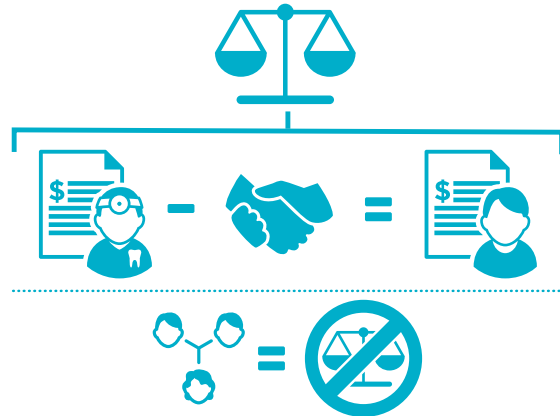


# B

---

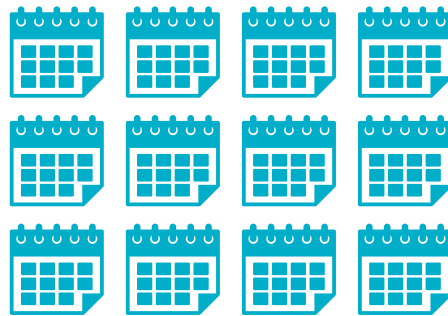
## Balance Billing

The practice of billing a patient for the difference between what the dentist charges and the agreed-upon charge established by Delta Dental. In-network dentists cannot balance-bill patients.



## Benefit Year

The 12-month period your dental plan covers, which is not always a calendar year. For example, a benefit year could run June-May instead of January–December. This is also known as a plan year.



# C

---

## Certificate of Coverage

A booklet you receive from Delta Dental that explains your benefits coverage in detail.



# Benefit Levels

Dental treatments are grouped into levels. The percentage covered by your dental plan often varies by benefit level. Most plans include the following benefit levels:



## Preventive Services

Usually includes exams, cleanings, X-rays and fluoride treatments.



## Basic Services

Usually includes procedures such as fillings, root canals, periodontal (gum) treatment and simple tooth extractions.



## Major Services

Usually includes procedures such as crowns, dentures and implants.



## Emergency Services

Dental services that are required immediately to avoid jeopardizing the patient's health, or to relieve pain, swelling or bleeding.



## Orthodontic Services

Treatment and procedures used to correct misaligned or crooked teeth. May include braces, retainers and other orthodontic appliances.



# C

---

## Claim/Claim Form

Information the dentist submits to the dental plan to get paid for services performed on a patient.



---

## Coinsurance

A fixed percentage of a dental treatment cost that you share with your dental plan. For example, Delta Dental may pay for 80 percent of a given service, while you are responsible for 20 percent. Coinsurance kicks in after you meet your deductible.



---

## Copayment

A set dollar amount you are required to pay your dentist for a service. An enrollee usually has a copayment or coinsurance, but not both. (Also known as “copay.”)



---

## Covered Service

A dental treatment or procedure paid for – either partially or fully – by your dental benefits.

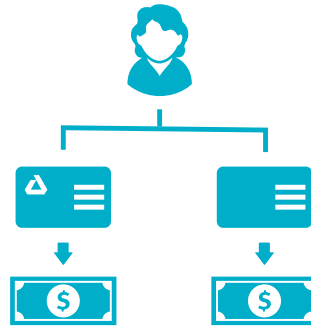


# C

---

## Coordination of Benefits

Guidelines that determine how each dental plan pays when you are covered by more than one dental plan.



## Credentialing

A process to ensure a dentist is properly trained to treat patients before being able to be a part of Delta Dental's networks.

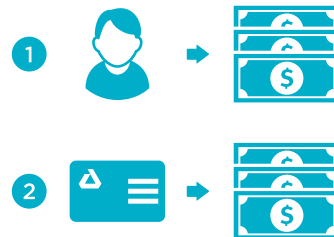


# D

---

## Deductible

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



## Dependents

Anyone covered under a dental plan other than the primary subscriber. For example, a spouse or children.





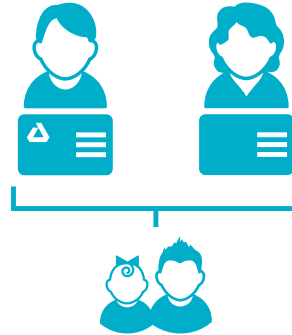
# D

---

## Dual Coverage

Coverage under two separate dental plans — for instance, if a child is covered by dental plans from both parents.

*Also see “Coordination of Benefits.”*



# E

---

## Effective Date

The date you can start using your dental benefits plan.



## Enrollee

A person covered under a dental plan.



## Exclusions

Dental services or procedures not covered by your dental plan.



---

# E

## Explanation of Benefits (EOB)

A document Delta Dental provides after a procedure. It contains a summary of the treatments you received, including the treatment cost, the portion covered by your dental plan, and the portion you may owe. An EOB is not a bill.



---

# F

## Fee Schedule

A list of charges for specific dental treatments agreed to by both the dental plan and the dentist.



---

# G

## Group

A company or organization that provides dental benefits to its employees or members. The group works with Delta Dental to select the plan type, benefit levels, maximums and member eligibility.



---

# H

## HIPAA

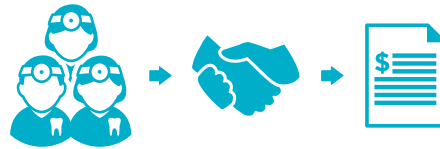
Stands for the “Health Insurance Portability and Accountability Act of 1996,” a federal law intended to improve access to health coverage, limit fraud and abuse, protect personal health information (PHI), and control administrative costs.



---

## In-Network Dentist

A dentist who has agreed to be part of a Delta Dental network. In-network dentists agree to accept pre-established fees for services.



---

## Lifetime Maximum

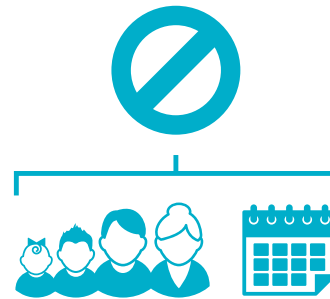
The maximum amount a plan will pay over the course of a lifetime. The lifetime maximum may apply to an individual or a family and usually applies to specific treatments such as orthodontia.



---

## Limitations

Conditions, such as age and period of time covered, that restrict a dental plan's coverage for certain services.



---

## M

### Maximum Benefit

See "Annual Maximum."

# M

---

## Maximum Plan Allowance (MPA)

The amount set by Delta Dental that a Delta Dental Premier® dentist has agreed to charge for a service.



## Member

See “Enrollee.”

# N

---

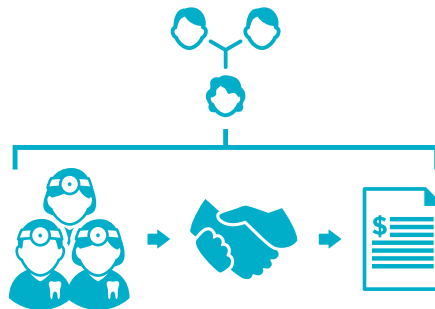
## National Provider Identifier (NPI)

A unique identification number used to identify a health care professional as an alternative to their dental license number.



## Network

Dentists who have signed up with Delta Dental to provide dental care at agreed-upon fees.



# N

---

## Non-Participating Dentist

See “Out-of-Network Dentist.”

# O

---

## Open Enrollment

The period of time in which employees or qualified individuals can enroll in or make changes to benefit plans.



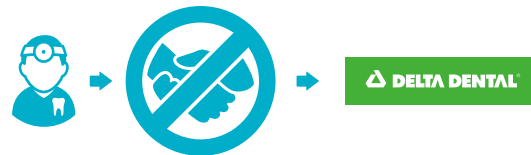
## Optional Services

Procedures not covered under the terms of a dental benefits contract. Delta Dental will review claims for optional services to determine what, if any, amount will be paid for the service.



## Out-of-Network Dentist

A dentist who has not signed up to participate with Delta Dental.



# P

---

## Participating Dentist

See “In-Network Dentist.”

# P

---

Plan Year

See “Benefit Year.”

## Protected Health Information (PHI)

Personal information about a patient, such as a Social Security number and medical history, which is required to be stored securely by health care entities such as a doctor, dentist, health clinic or health insurer.



## Pre-Determination

See “Pre-Treatment Estimate.”

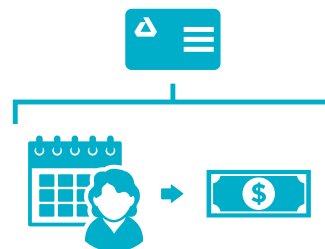
## Pre-Established Fee

The amount set by Delta Dental that an in-network dentist has agreed to charge for a service.



## Premium

The amount the enrollee pays for dental benefits, usually paid monthly, quarterly or annually.



# P

---

## Pre-Treatment Estimate

A treatment plan usually submitted by a dentist for Delta Dental to review and provide an estimate of benefits before treatment starts. Pre-treatment estimates can help you budget for dental procedures. They can also help you and your dentist decide how to proceed with a treatment. This is sometimes referred to as Pre-Authorization.



## Processing Policies

Clinical guidelines to validate that a dental treatment or procedure meets the criteria set by your dental plan. Processing policies may change occasionally. If a processing policy is applied to a billed service, it will be explained on the Explanation of Benefits (EOB).



## Provider

See “Dental Professionals.”

# S

---

## Subscriber

A person who has signed up for dental coverage from Delta Dental. If family coverage is offered, additional people covered will be listed as the subscriber’s spouse or dependents.

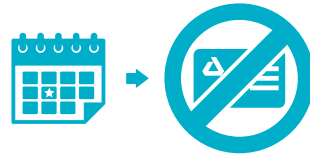


# T

---

## Termination date

The date your dental benefits coverage ends or you are no longer eligible for benefits.



# W

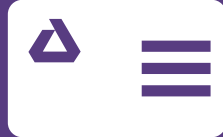
---

## Waiting Period

A period of time before you are eligible to receive benefits for all or certain dental treatments.





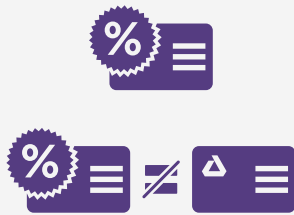


# Plan Types



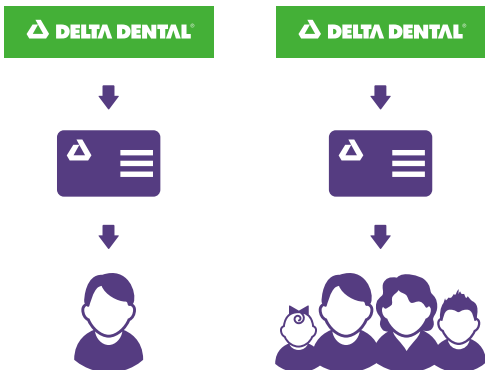
## DHMO (Dental Health Maintenance Organization)

Also referred to as pre-paid plans, DHMOs require you to choose one dentist or dental facility for all of your oral health needs. These plans don't have deductibles or maximums. An enrollee pays a fixed dollar amount (copayment) to the dentist at visits. Delta Dental's DHMO plan is called DeltaCare® USA.



## Discount Card/Plan

An option for individuals and families that do not have dental benefits. Enrollees have access to dentists who have agreed to charge discounted fees for certain services. Patients pay the agreed-upon fee directly to the dentist. A discount card/plan is not insurance.



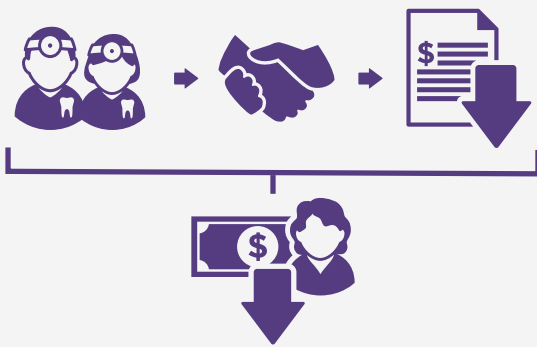
## Individual and/or Family Plan

Dental plans that individuals and their families can purchase directly from Delta Dental rather than through an employer.



## Managed Fee-for-Service

A type of dental plan where participating dentists agree to fee schedules that can provide discounts for dental care. Delta Dental's managed fee-for-service option is called Delta Dental Premier®.



## PPO (Preferred Provider Organization)

A dental plan in which participating dentists agree to fee schedules that provide deeper discounts and lower out-of-pocket expenses. Delta Dental's PPO options are called Delta Dental PPO<sup>SM</sup> and Delta Dental PPO plus Premier.



## Voluntary

A dental benefits plan offered through an employer where employee participation is optional. Employers usually don't help cover the cost of the plan but still allow employees to enjoy pre-tax savings on premiums through payroll deduction.



# Dental Professionals



## Endodontist

A dental specialist who treats disease and injuries of the tooth pulp. A patient who needs a root canal may be treated by an endodontist.



## General Dentist

A primary dental care provider with a broad range of general oral health expertise. General dentists perform preventive care as well as many restorative procedures such as fillings, crowns, implants and more.



## Hygienist

A licensed dental professional who assists or performs procedures such as screenings, X-rays and cleanings. The range of services hygienists can perform varies from state to state.



## Oral Maxillofacial Radiologist

A dental specialist who performs and reads diagnostic imagery (such as X-rays, CT scans and ultrasounds) used to examine bones in the skull and face, as well as dental structures.



## Oral Pathologist

A dental specialist trained to diagnose dental diseases.



## Oral Surgeon

A dental specialist trained to perform dental surgeries such as wisdom teeth removal, dental implants and more.



## Orthodontist

A dental specialist who treats the misalignment of the teeth and their surrounding structures, using appliances such as braces and retainers.



## Pediatric Dentist

A dental specialist who treats children; formerly known as a pedodontist.



## Periodontist

A dental specialist who treats diseases of the supporting and surrounding tissues of the teeth. Patients with periodontal (gum) disease are treated by a periodontist.



## Prosthodontist

A dental specialist who restores natural teeth and replaces missing teeth with artificial substitutes, like implants or dentures.



## Specialist

A dentist who concentrates on one discipline, such as pediatric dentistry, orthodontia or prosthodontics.