



Frequently Asked Questions about the transition to Delta Dental of Washington

What is Delta Dental?

Delta Dental is America's largest and most trusted dental benefits carrier. We are proud to partner with the WTIA to serve you and all their members. With your WTIA's Delta Dental plan, you will have access to the nation's largest dental network. All customer service and claims processing for your dental plan will be handled by Delta Dental of Washington, in Seattle, Washington.

How does this dental plan work?

The dental plans offered to members of the WTIA are Delta Dental PPO, preferred provider plans. You can choose any dentist at the time of treatment. However, if you select a dentist who is part of the *Delta Dental PPO network*, you will receive a higher level of benefits. In addition, your out-of-pocket expenses will be lower and you can stretch your annual maximum further.

What are the advantages of seeing a Delta Dental PPO dentist?

Delta Dental PPO dentists have agreed to a lower average fee schedule, so your financial responsibility towards your treatment cost will be lower. Delta Dental PPO dentists receive payment based on their lower PPO fees and they cannot charge you more than these pre-approved fees. They also agree to complete and submit claim forms directly to Delta Dental. You are responsible only for your deductible, coinsurance and/or amounts in excess of the annual maximums.

How do I find a Delta Dental PPO network dentist in my area?

You can find a Delta Dental PPO network dentist in their area by visiting Delta Dental's Web site at www.DeltaDentalWA.com. The Find a Dentist tool is under the Patients tab. To receive the highest level of benefits, be sure to search by the Delta Dental PPO network. If you already have a dentist and you want to check if they are a Delta Dental PPO network dentist, choose the "Advanced Search" option and enter your dentists' name. You may have better results if you expand your search from 5 miles to 10 miles from your home.

My dentist is not part of the Delta Dental PPO network, but he/she is part of the Delta Dental Premier network. Are there any advantages?

Your benefits will be lower than if you sought treatment from a PPO dentist. However, there are still advantages to receiving care from a Delta Dental Premier dentist. Delta Dental Premier Dentists also have pre-approved fees, but they are not typically discounted as much as a Delta Dental PPO dentist. Delta Dental Premier dentists will still submit claims for you and receive payment directly from Delta Dental. Their payment will be based upon their pre-approved fees with Delta Dental. They cannot charge you more than these fees. You are responsible only for your deductibles, coinsurance and/or amounts in excess of the annual maximums. You can find a Delta Dental Premier dentist in their area by following the instructions outlined above and look for the Delta Dental Premier network.

What if the dentist is not part of either network?

You are not limited to visiting a Delta Dental dentist. However, you will receive the lower level of benefits offered under your WTIA dental plan. Also, if you choose a non-network dentist, you will be responsible for having the dentist complete and sign claim forms. It will also be up to you to ensure that the claims are sent to Delta Dental. Claim payments will be based on actual charges or the maximum allowable fees for non-network dentists, whichever is less. Any difference between the dentist's actual charges and the plan's maximum allowable fees for non-network dentists is your responsibility. This is in addition to any coinsurance responsibility.

How do I pay my dentist for my dental treatment?

If you choose a Delta Dental network dentist, the provider will complete the claim form and submit it to Delta Dental for you. The claim payment will be sent directly to your network dentist. You are responsible only for their annual deductible and coinsurance amounts. If you see a dentist who is not part of one of Delta Dental networks, you will be responsible for having the dentist complete and sign the claim forms. It is also your responsibility to ensure that the claims are sent to Delta Dental of Washington.

Will I be receiving new ID cards for the dental plan?

Yes, you will be receiving new dental ID cards from Delta Dental of Washington. You will receive two cards. Delta Dental ID cards are issued with the employee's name and ID number. Covered dependents do not receive separate cards. The ID cards will have your unique ID number with Delta Dental. They do not contain your social security number. Once you receive their ID card, please share it with your dentist so they can submit future claims to the Delta Dental of Washington.

The cards will be mailed to your home address around the time of their effective date under the plan. If you do not receive your cards prior to a dental appointment, you can still seek dental treatment. Tell your dentist that you are covered by Delta Dental of Washington under the WTIA dental plan. Your dentist can verify your eligibility and benefits with Delta Dental's customer service department. You can also go to our website at www.DeltaDentalWA.com and print a copy of your ID card. This paper copy of your card will contain the information the dentist needs to submit a claim.

If you have lost your ID card or need additional copies, please contact our customer service department at (800) 554-1907. Our customer service representative can order additional ID cards for you.

What happens if I am currently in the middle of treatment when I initially become enrolled under the dental plan?

A few dental procedures require more than one appointment, i.e., crowns, bridges, dentures and root canals. If the treatment is completed *after* the effective date under Delta Dental, the claim should be submitted to Delta Dental of Washington, not the WTIA's former dental carrier.

Against which plan year will multiple appointment procedures (i.e., crown, bridges, dentures and root canals) accumulate?

Delta Dental reimburses these types of procedures on the date the treatment is completed (not started). For example, the tooth is prepped for a crown on December 15, 2023; however, the permanent crown is placed on the tooth on January 15, 2024. The claim will be paid after January 15th. It will accumulate towards the 2024 annual maximum.

What happens if my child is currently in the middle of orthodontia (braces) when I initially become enrolled under the dental plan?

It is important to confirm your plan under the WTIA offers orthodontia benefits. If you or your family member started orthodontia treatment prior to your effective date with Delta Dental, the claim will be prorated based on the remaining balance of the treatment plan when you become enrolled with Delta Dental. The below example assumes a December 1, 2023 effective date and the WTIA's orthodontic benefit of 50% coinsurance up to a \$1,000 lifetime maximum.

Banding Date: February 1, 2023

Total Length of Treatment: 24 Months

Total Case Fee: \$4,800

The available orthodontia benefit is determined by deducting the monthly fees for treatment prior to your effective date with Delta Dental from the total case fee. The monthly fees are determined by dividing the number of months in the Total Length of Treatment by the Total Case Fee - $\$4800/24 = \200 .

\$ 4800 Total Case Fee

-\$2000 Deduct \$200 for Monthly Fee for 2/2023-11/2023 (10 months @\$200 each)

\$ 2800 Remaining Treatment Balance at Patient's Effective Date with Delta Dental

The remaining balance after these deductions is \$2,800. Payment is made at 50% of this remaining balance, up to the patient's \$1,000 lifetime maximum. So, with this example, Delta Dental would pay \$1,000 toward this patient's orthodontia treatment. (50% of \$2800 = \$1400. Benefit covers up to a maximum of \$1,000 of the \$1400.)

Please instruct your orthodontist to submit the patient's treatment plan to Delta Dental of Washington.

How do I access information about my dental coverage?

Once you are enrolled with Delta Dental of Washington, you will have access to our secured MySmile Patient Portal at www.DeltaDentalWA.com. Our MySmile tool makes it easy for you to access information about your benefits and plan coverage, including remaining deductibles, maximums balances and payment history, view and print copies of your ID cards, get a cost estimate on upcoming care, and find a PPO network dentist. Upon your initial visit to MySmile, you will be prompted through a one-time registration process to set up your username and password, which will then be used on all subsequent visits.

You may also download our free mobile app available at the App Store for Apple users, or Google Play for Android users. Our mobile app allows you to Find a Dentist, check the status of your claim, view your coverage details, and download your ID card to your phone's wallet.

How do I contact Delta Dental?

For information on your dental benefits, you may:

Call 800.554.1907, Monday – Friday from 7am to 5pm, Pacific Time
Text 833.604.1246, Monday – Friday from 7am to 5pm, Pacific Time
Visit DeltaDentalWA.com

Our mailing address is:

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