

Open Enrollment for 2024

Blue Valley School District Delta Dental of Kansas Benefits



YOUR DENTAL BENEFITS

Blue Valley School District offers benefit eligible employees two dental plans to choose from.

The following slides will detail the two plans, referred to as the Base Plan Option and the Buy Up Plan Option.





Your Plan Type and Dentist Network

Plan Type: Delta Dental PPO™

Dentist Network: Delta Dental PPO™ & Delta Dental Premier®

You have access to both our nationwide networks with your plans, however your plans have higher coverage, and greater savings for you, when visiting a Delta Dental PPO network dentist.

You can easily search for an in-network dentist by using the online dentist search at **DeltaDentalKS.com**.





Your Delta Dental of Kansas Benefits Overview – <u>Base Plan</u>

Your Dental Network

Delta Dental PPO & Premier

Annual Maximum Benefit (per person, per calendar year)

\$1,500

Deductible (per calendar year, diagnostic and preventive services are NOT subject to deductible)

\$50 per person, \$150 max

Eligible Children Ages (dependent children are eligible for coverage)

To end of the year in which the dependent turns 26

Ortho Lifetime Maximum

(per dependent child)

\$1,000





Your Delta Dental of Kansas Benefits Overview – <u>Base Plan</u>

Delta Dental PPO Network Coverage

Diagnostic & Preventive Services (exams, cleanings, x-rays, etc.; NOT subject to the deductible)	100%
Basic Services (cavity fillings, emergency exam, oral surgery, endodontics, periodontics, etc.)	80%
Major Services* (crowns, bridges, dentures, implants, occlusal guards, etc.)	50%
Orthodontics* (orthodontic appliances and treatment for dependent children age 19 and under)	50%

^{*}All Major and Orthodontic Services are subject to a twelve (12) Major and Orthodontic Services are subject to a twelve (12)



Your Delta Dental of Kansas Benefits Overview – <u>Buy up Plan</u>

Your Dental Network

Delta Dental PPO & Premier

Annual Maximum Benefit (per person, per calendar year)

\$1,700

Deductible (per calendar year, diagnostic and preventive services are NOT subject to deductible)

\$50 per person, \$150 max

Eligible Children Ages (dependent children are eligible for coverage)

To end of the year in which the dependent turns 26

Ortho Lifetime Maximum (per person)

\$1,500





Your Delta Dental of Kansas Benefits Overview – <u>Buy up Plan</u>

Delta Dental PPO Network Coverage

Diagnostic & Preventive Services (exams, cleanings, x-rays, etc.; NOT subject to the deductible or the annual maximum)	100%
Basic Services (cavity fillings, emergency exam, oral surgery, endodontics, periodontics, etc.)	80%
Major Services* (crowns, bridges, dentures, implants, occlusal guards, etc.)	50%
Orthodontics* (orthodontic appliances and treatment for adults and dependent children through age 26)	50%

^{*}All Major and Orthodontic Services are subject to a twelve (12) Major and Orthodontic Services are subject to a twelve (12)





Your Delta Dental of Kansas Benefits Overview

Right Start 4 Kids Program (RS4K)

Both the Base and Buy Up plan have RS4K:

- 100% coverage for kids 12 & under for all covered services under the plan, excluding orthodontics.
- Must see an in-network dentist RS4K will only apply when visiting a
 Delta Dental PPO or Delta Dental Premier dentist. If an out-of-network
 dentist is seen, then the underlying contract applies including waiting
 periods, deductibles and coinsurance levels.
- Covered services under RS4K are **not subject to the plan's deductible or waiting periods**.
- Covered services under RS4K are subject to plan's annual maximum.





Your Delta Dental of Kansas Benefits Overview

Unlimited Cleanings Program

Both the Base and Buy Up plan have Unlimited Cleanings:

- The Unlimited Cleanings Program allows coverage for both regular cleanings and periodontal cleanings at an unlimited frequency. Services that apply to this program:
 - Prophylaxis (regular/routine teeth cleaning) for adults and children.
 (D1110 & D1120)
 - Periodontal Maintenance (or periodontal cleaning), a more extensive teeth cleaning performed when an individual has history of nonsurgical or surgical periodontal treatment. (D4910)
- Your underlying contract applies with the exception of the frequency limitations on the services listed above.
- Cleanings are subject to the plan's annual maximum under the Base Plan.



MEMBER TOOLS





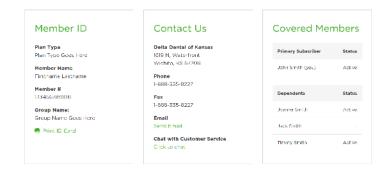
Online Member Account

You can manage your dental benefits online through your member account. Easily log in or register at

DeltaDentalKS.com/Member

- View and print ID cards
- View your benefits & eligibility, claims and FOBs
- Consent to receive electronic communications
- Estimate your out-of-pocket costs
- Track your dental cleanings
- And more!
- For questions contact customer service at: 800-234-3375











Estimator



Member



View Claims





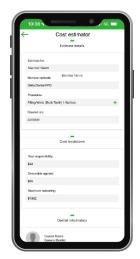




With Delta Dental's mobile app you can:

- Use your mobile ID card
- Find a dentist
- Use the Dental Care Cost Estimator*
- Check coverage and claims
- And more!











^{*}The Dental Care Cost Estimator provides an estimate and does not guarantee the exact fees for dental procedures, what dental benefits plan will cover or your out-of-pocket costs. Estimates should not be construed as financial or medical advice. For more detailed information on your actual dental care costs, please consult your dentist and call Delta Dental of Kansas at 800.234.3375.

Thank you!



