Save money with a DeltaCare USA dentist
DeltaCare USA plan features:
• Set copayments.
• No annual deductibles and no maximums for covered benefits.
• Low out-of-pocket costs for many diagnostic and preventive services (such as professional cleanings and regular dental exams).

Choosing your DeltaCare USA dentist
When you enroll, you choose DeltaCare USA contracted general dentists in the Texas service area to receive benefits under your plan. To find the most current listing of DeltaCare USA network dental offices:
• Visit our website and click on “Find a Dentist” on our home page.
• Select “DeltaCare USA” as your plan network.
You can also call Customer Service for help in finding a dentist.

Visit your DeltaCare USA dentist
You must visit your selected DeltaCare USA dentist to receive benefits under your plan.*
• If you do not select a dentist, we will select a dentist for you.

• Family members may select a different dentist for treatment within the covered service area. Refer to your plan booklet for details.
• You can change your selected network dentist by telephone or through our website.
• Changes received by the 21st of the month will be effective the first day of the following month.

Easy to use
• We will notify your DeltaCare USA dentist about your enrollment in the plan, and other important details about your coverage such as dependent information, group number and Benefits ID number.
• No ID card is required to receive services; simply provide the dental office with your name, date of birth and Benefits ID number.
• With DeltaCare USA, there are no claim forms to submit. And, since you are responsible only for the copayment at the time of treatment, you will not receive a claims statement.
• Predictable costs: you’ll find a complete list of covered procedures, copayments, plan limitations and exclusions in your plan booklet.

*Please review your plan booklet for specific details about your plan.
With DeltaCare USA, you and your family will enjoy many new features including:

- Expanded business hours/toll-free customer service
- Out-of-area emergency coverage
- Orthodontic treatment in progress provision

**Specialty care and authorizations**
If you require treatment from a specialist, your DeltaCare USA general dentist will coordinate any referrals for you.
Delta Dental must pre-authorize any dental services, with the exception of emergency treatment, that are not performed by your DeltaCare USA general dentist. Please refer to your plan booklet for specific details about your plan.

**Dual coverage/Coordination of benefits**
If your spouse has coverage with another dental plan, you or your family members may be covered by both dental plans.*
- We do not coordinate benefits with the other plan when you receive treatment from your DeltaCare USA general dentist. However, if you receive authorized treatment from a specialist (such as an oral surgeon), we will coordinate benefits with the other carrier.
- Ask your specialist to submit the other plan’s explanation of benefits with the DeltaCare USA claim form and we’ll take it from there.

**Orthodontic treatment in progress**
DeltaCare USA has an orthodontic treatment-in-progress provision that allows new enrollees to continue treatment with their current orthodontist, as long as the enrollee is in active treatment started under his or her previous employer-sponsored dental plan. Enrollees are responsible for all copayments and fees subject to the provisions of their prior dental plan.**

**Transitioning from another plan?**
Your DeltaCare USA plan covers treatment started and completed only after your plan’s effective date of coverage. If you have any dental treatment in progress when your coverage begins — root canals in progress, teeth prepared for crowns and dentures for which an impression has been taken — those expenses are not covered by your DeltaCare USA plan. However, the DeltaCare USA plan has no exclusion for pre-existing dental conditions or missing teeth.

Visit our website:
www.deltadentalins.com/universityoftexas
On our website, you can:
- Find a dentist in our online directory
- Review benefits
- Verify eligibility
- Print an ID card and much more

Accessing some services requires a login. If you are visiting our website for the first time, you’ll need to complete a quick one-time registration process by clicking the “Register Today” link.

**Questions about your plan?**
If you have questions, you can check your benefits and eligibility information on our website or on our interactive voice response telephone line. For more information, you may also contact us through our website or call one of our helpful multilingual Customer Service representatives toll-free during business hours at 1-800-893-3582.

* Please review your plan booklet for specific details about your plan’s coordination of benefits, including rules for determining primary and secondary coverage.

**Please refer to your plan booklet for specific coverage details.