



DeltaCare® USA FAQs

What is DeltaCare USA?

DeltaCare USA is a closed network dental plan that features set copayments, no annual deductibles and no annual maximums for covered benefits. Upon enrollment, you will receive a plan booklet with defined copayments for covered services. You must seek treatment from your assigned primary care dentist in the DeltaCare USA network in order to receive treatment.

How does the plan work?

Once enrolled, you must receive care from your assigned primary care dentist within the DeltaCare USA network. At the time of service, you will pay the dentist only the listed copayment (found in your member copay schedule) for covered services.

If I enroll in the DeltaCare USA plan, how will a dentist be assigned to my family and I?

You and your eligible dependents may receive care from the same DeltaCare USA network dentist, or if you prefer, you may select individual DeltaCare USA dental facilities. If you do not select a DeltaCare USA primary care dentist at your initial enrollment, the first DeltaCare USA network dentist you visit will be assigned as your primary care dentist. You may also self-assign by using the website or contacting customer service. You will receive a welcome packet in the mail which will include details regarding your coverage and how to use the plan.

Does everyone in my family have to use the same DeltaCare USA provider?

No. Each member of your family can choose a different primary care provider. You are not required to use one primary care provider for the whole family. You will need to actively assign a new provider for your family members if they would like to seek treatment elsewhere.

How do I find a participating DeltaCare USA provider?

You can search for a dentist by visiting <https://www1.deltadentalins.com/individuals/find-a-dentist.html>. You must enter your location and for a more targeted search, you can enter the name of a specific dentist or dental office. To ensure you can visit or be assigned to an office, filter your search by selecting “accepting new patients.” Please be sure to select "DeltaCare USA network" when searching for a primary care provider.

How do I change my provider for my entire family or for a specific family member?

You are able to switch your primary care dentist at any time. You can change your DeltaCare USA dentist by registering online at <https://www1.deltadentalins.com/members/deltacare-usa-groups.html> or by calling a DeltaCare USA customer service representative at 800-422-4234. Dentist changes made by the 15th of the month are effective immediately. Dentist changes made on or after the 16th of the month will be effective the first of the following month.

Once you register online at <https://www1.deltadentalins.com/members/deltacare-usa-groups.html>, you can:

- View benefits
- Verify eligibility
- View the assigned DeltaCare USA dentist for each family member
- Search for a DeltaCare USA primary dentist and/or change dentists
- Print ID card

Does my assigned dentist need to be located in the same state which I reside?

No. If you would like to change your dentist to a different state, you may do so by logging into your online account, locating a preferred DeltaCare USA provider in another state and selecting as your assignment.

If you have the need to see a specialist, your primary care provider and specialist must be located in the same state.

How do I know what my out-of-pocket responsibility will be?

The DeltaCare USA member copay schedule provides a complete list of all covered services, by procedure code and the corresponding member responsibility. You must seek services from your assigned DeltaCare USA provider. Please refer to the member copay schedule for limitations and exclusions. If a procedure code is not listed on the member copay schedule, it is not covered. Implants, general anesthesia, IV sedation and occlusal guards are not covered under the copay schedule.

Where can I obtain a copy of the DeltaCare USA member copay schedule?

A copy of the member copay schedule can be downloaded from www.myfordbenefits.com. DeltaCare USA customer service representatives can provide plan design information by calling 800-422-4234, or you may register for an account online at <https://www1.deltadentalins.com/members/deltacare-usa-groups.html> to view benefits.

What do I do if I need to see a specialist?

Your primary care dentist will coordinate a referral for you to an in-network DeltaCare USA specialist, authorized by DeltaCare USA. Your specialist must be referred by your primary care dentist and must be located in the same state as your primary care dentist.

If there is no network specialist within the service area, a referral to an out-of-network specialist will be authorized at no extra cost, other than applicable copayments. Members must call customer service to see a non-DCUSA specialist and to request authorization for evaluation only. The specialist will submit authorization to treat patients. Please refer to your member copay schedule for limitations and exclusions.

Can a child visit a pediatric dentist?

Yes, a child is eligible to visit a pediatric dentist through age 13. Children through age 13 can go directly to DeltaCare USA pediatric dentist regardless of assignment and without a referral. Once the child becomes age 14, they must be assigned to a DeltaCare USA general dentist. Exceptions for medical conditions will be considered on an individual basis.

Is there a timeline for children to have orthodontia services started and completed?

The DeltaCare USA plan will cover up to 24 months of active treatment. Beyond 24 months, an additional monthly fee, not to exceed \$125, may apply.

How can I obtain information about my plan?

You can call DeltaCare USA customer service at 800-422-4234 or you may register for an account online at <https://www1.deltadentalins.com/members/deltacare-usa-groups.html> once you are enrolled in the plan.