



**SUNY Student Dental Plan - Cobleskill, Oneonta, Delhi  
2016-17 Plan**

## DELTA DENTAL PPO

Dental Services	Delta Dental PPO		Delta Dental Premier		Non Participating Providers	
	Paid by Plan	Paid by Patient	Paid by Plan	Paid by Patient	Paid by Plan	Paid by Patient
<b>Diagnostic</b>	100%	0%	100%	0%	100%	0%
<b>Preventive</b>	100%	0%	100%	0%	100%	0%
<b>Basic Restorative</b>	50%	50%	50%	50%	50%	50%
<b>Oral Surgery</b>	50%	50%	50%	50%	50%	50%
<b>Endodontics</b>	50%	50%	50%	50%	50%	50%
<b>Periodontics</b>	50%	50%	50%	50%	50%	50%
<b>Major Restorative</b>	50%	50%	50%	50%	50%	50%
<b>Prosthodontics</b>	50%	50%	50%	50%	50%	50%
<b>Orthodontics*</b>	50%	50%	50%	50%	50%	50%
<b>TMJ</b>	50%	50%	50%	50%	50%	50%
<b>Annual Out-of-pocket maximum per child</b>	\$350		NA		NA	
<b>Annual out-of-pocket maximum per 2+ children</b>	\$700		NA		NA	
<b>Patient deductible per contract year</b>	\$65		\$65		\$65	
<b>Family deductible per contract year</b>	\$195		\$195		\$195	

\*Orthodontic services are covered for **medical necessity** only.



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### **Guidelines:**

This plan meets the Essential Health Benefits requirements for enrollees under age 19.

Effective date of August 1, 2016.

Students are eligible to enroll in this plan regardless of age. Spouses of enrolled students are also eligible to enroll regardless of age. Dependent children of enrolled students are eligible to enroll up to age 26.

Rates assume that Delta Dental PPO participating providers are paid at the Delta Dental PPO Maximum Plan Allowance (MPA). Delta Dental PPO participating providers accept the Delta Dental PPO MPA as payment in full. Delta Dental PPO participating providers are paid directly by Delta Dental and by agreement cannot bill the patient more than the applicable copayments or deductibles for the services provided.

Under the Delta Dental PPO program, Delta Dental Premier participating providers are paid at the Delta Dental PPO MPA and are paid directly by Delta Dental. The enrollee is responsible for paying the difference between the Delta Dental PPO MPA and the Delta Dental Premier MPA. By agreement, Delta Dental Premier participating providers must accept the Delta Dental Premier MPA as payment in full, less any applicable copayments or deductibles for the services provided (and under this scenario the difference between the Delta Dental PPO MPA and the Delta Dental Premier MPA).

Non-Participating providers are paid at the Delta Dental PPO MPA. The benefit payment is sent directly to the enrollee. It is the enrollee's responsibility to pay the provider. The enrollee is responsible for paying the difference between the Delta Dental PPO MPA and the amount billed by the Non-Participating provider, plus any applicable copayments or deductibles.

*For ID card please call: Delta Dental at 1-800-932-0738*

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