Montclair Board of Education-Advantage Buy-Up Plan
Delta Dental PPO Plus Premier™

Preventive & Diagnostic
* Exams, Cleanings & Bitewing X-rays (each subject to frequency limitations) 60%
* Fluoride Treatment (subject to frequency limitations, children to age 19)
* Sealants

Remaining Basic
* Fillings, Simple Extractions, Cone Beam Radiographs 50%
* Endodontics Root Canals (Anterior/Bicuspid), Non-Surgical Periodontics, Periodontal Maintenance
* Periodontics, Oral Surgery

Crows & Prosthodontics
* Crowns, Gold Restorations (over natural teeth) 50%
* Bridgework, Full & Partial Dentures, Repair of Dentures, Bony Impaction Removal
* Root Canals (Molar), Osseous Surgery

Calendar Year Maximum (per patient) $2,000
Orthodontic Benefits, full comprehensive treatment (Adult & Child) $2,000
* Lifetime Maximum (per patient)

Carryover MaxSM from Delta Dental allows you to increase your benefits.

This valuable benefit feature allows you to carry over a portion of your unused standard annual maximum benefit limit into the next year, and beyond. You can accumulate part of your unused benefit dollars from a healthy year and use it for larger, more expensive procedures in the future—such as bridges, crowns, and root canals.

Carryover MaxSM is easy and automatic.
- To qualify for Carryover MaxSM, you must receive at least one cleaning or one oral exam during the plan year. If you don’t receive a cleaning or exam, you won’t be eligible to carry over any of your benefit dollars to the following year. If you fail to do so, any accumulated carryover will be lost.
- A covered person is eligible for the Carryover MaxSM benefit if less than half of the standard annual maximum is used in the prior benefit year.
- Carryover MaxSM allows you to carry over up to 25% of the unused portion of your standard annual maximum up to a maximum of $500. For example, if your standard annual maximum is $1,000, and you use $200, you can carry over $200 ($800 x 25% = $200)
- The accumulated amount can never exceed your standard annual maximum.
- Standard annual maximum dollars are used first. Carryover MaxSM dollars are used after the standard annual maximum is met.

Delta Dental’s Oral Health Enhancement Option enables you to receive up to four dental cleanings and/or periodontal maintenance procedures in any combination per benefit period if you have been treated for periodontal (gum) disease in the past. For the additional dental cleaning and/or periodontal maintenance procedures to be covered, you must have had periodontal surgery or periodontal scaling and planning in the past. Details on how to qualify can be found in your benefit booklet.

Over 300,000 participating dental offices nationwide participate with the national Delta Dental system, although you may choose any fully licensed dentist to render necessary services. Participating dentists will be paid directly by Delta Dental to the extent that services are covered by the contract. Non-participating dentists will bill the patient directly, and Delta Dental will make payment directly to the member. Maximum benefit may be derived by utilizing the services of a participating dentist.

Where the eligible patient is treated by a Delta Dental PPO dentist, the fee for the covered service(s) will not exceed the Delta Dental PPO maximum allowable charge(s). Where the eligible patient is treated by a Delta Dental Premier® dentist who does not participate in Delta Dental PPO or by a Participating Specialist, the dentist has agreed not to charge eligible patients more than the dentist’s filed fee or Delta Dental’s established maximum plan allowance, and Delta Dental will pay such dentists based on the least of the actual fee, the filed fee, or Delta Dental’s established maximum plan allowance for the procedure(s). Claims for services provided by dentists who are neither Delta Dental Premier, Delta Dental PPO dentists, or Participating Specialists are paid based on the lesser of the dentist’s actual charge or the prevailing fee.

Visit your own dentist. If you do not have a dentist, there is a directory available with your plan administrator listing participating dentists. You may call 1-800-DELTA-OK and a list of participating dentists located in your area will be mailed directly to your home, or you may access our Website at www.deltadentalnj.com.

During your FIRST appointment, tell your dentist that you are covered under this program. Give him/her your Group’s name, its Delta Dental Group Number and your Member ID number.

If you have any questions regarding your benefits, you may contact our Customer Service Department Monday through Thursday, 8:00 a.m. to 6:30 p.m. EST and Friday, 8:00 a.m. to 5:00 p.m. EST, at 1-800-452-9310.

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- Oral Health and Wellness - Check out grin! magazine to learn more about the connection between a healthy smile and overall wellbeing

Three Easy Ways to Find a Participating Dentist

1. Website. Use the Find a Dentist tool at DeltaDentalNJ.com
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**Montclair Board of Education-Advantage Base Plan**

**Delta Dental PPO Plus Premier™**

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**Preventive & Diagnostic**
- Exams, Cleanings & Bitewing X-rays (each subject to frequency limitations)
- Fluoride Treatment (subject to frequency limitations, children to age 19)
- Sealants

**60%**

**Remaining Basic**
- Fillings, Simple Extractions, Cone Beam Radiographs
- Non-Surgical Periodontics, Periodontal Maintenance
- Root canals (Anterior/Bicuspid), Oral Surgery

**50%**

**Crowns & Prosthodontics**
- Crowns, Gold Restorations (over natural teeth)
- Bridgework, Full & Partial Dentures, Repair of Dentures
- Bony Impaction Removal, Root Canals (Molar), Osseous Surgery

**50%**

**Calendar Year Maximum (per patient)**

$1,000

**Orthodontic Benefits, full comprehensive treatment (Child only)**
- * Lifetime Maximum (per patient)

$1,000

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**Delta Dental’s Oral Health Enhancement Option** enables you to receive up to four dental cleanings and/or periodontal maintenance procedures in any combination per benefit period if you have been treated for periodontal (gum) disease in the past. For the additional dental cleaning and/or periodontal maintenance procedures to be covered, you must have had periodontal surgery or periodontal scaling and planing in the past. Details on how to qualify can be found in your benefit booklet.

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2022
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* Full & Partial Dentures

Calendar Year Maximum (per person) $1,000

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Connect with Your Benefits on MySmile®
MySmile offers free, easy-to-use tools that make navigating your Delta Dental benefits a whole lot simpler.

Access MySmile from your computer or mobile device to securely:

- View your coverage
- Check your dental claims
- View and print your ID card
- Review your treatment history
- Find a dentist
- Get a cost estimate
- And more

Visit our Website or Download our App

How to Register:

1. Visit DeltaDentalNJ.com; click “Sign In or Register” on the top right corner of the homepage.
2. Click “Register Now” and enter your contact information.
3. Create a username and password when prompted.
4. Read and check the box to “agree to Terms of Use” for our website.
5. Click “Register”; you will be emailed a code within 24 hours to the email address you used when registering.
6. Enter the code when prompted.
7. Once you enter the code, you will be able to access your account using your newly created username and password!

The subscriber and any adult dependents on the plan can create their account with or without an ID number.

(800) 452-9310   www.deltadentalnj.com  © 2020 Delta Dental of New Jersey  August 2020
No Plan ID Card? No Problem!

You don’t need a plan ID card to receive service from your dentist.

Just tell your dental office that you’re covered by Delta Dental and provide your name, your date of birth, your enrollee ID number, and the name of your employer.

Do you have dependents on your plan? Tell them to provide your plan details.

Want an ID Card anyway?

Print one from your computer:
• Go to DeltaDentalNJ.com
• Log in to MySmile® and download your ID card from your dashboard

Download our app:
• Search ‘Delta Dental’ in the App Store or Google Play
• Our App is provided by Delta Dental Plans Association
Carryover Max™
A Delta Dental benefit feature that lets members carry over part of their unused standard annual maximum in one year to increase benefits for the following year and beyond.

Qualifying for Carryover Max Benefits
Members must meet the following criteria to qualify for Carryover Max benefits:

- Enroll on or before the effective date of the Carryover Max benefit year. The benefit year to accumulate Carryover Max benefits are the same as the group’s standard annual maximum (calendar year or contract year). Members enrolling after the effective date of the Carryover Max benefit period are not eligible to accrue carryover benefits until the start of the next benefit year.
- Use no more than 50% of the standard annual maximum during the benefit year.
- See a dentist during the benefit year for an exam or cleaning and submit a claim for these services. If a claim for an exam or cleaning is not received, any accumulated Carryover Max benefit will be lost.

Members meeting these criteria can accumulate 25% of the unused standard annual maximum. Members continuing to accumulate benefits can eventually have twice the standard annual maximum available. The accumulated amount can never exceed the standard annual maximum amount. Claims will always use the plan’s annual maximum first. The accumulated benefit is applied when the standard annual maximum is exhausted.

An Example of Carryover Max Benefits

<table>
<thead>
<tr>
<th>Benefit Year</th>
<th>Standard Annual Maximum</th>
<th>Usage Limit: 50% of Standard Annual Maximum</th>
<th>Accumulation Limit: 25% of the Standard Annual Maximum</th>
<th>Maximum That Can Be Carried Over</th>
</tr>
</thead>
<tbody>
<tr>
<td>Calendar Year Beginning 1/1/20XX</td>
<td>$1,000</td>
<td>$500</td>
<td>$250</td>
<td>$500</td>
</tr>
</tbody>
</table>

Year 1:
The member is eligible on 1/1/20XX. During the year, the member has a dental cleaning for $80 and no other dental services. At the end of the year, the member has $920 of the standard annual maximum remaining and used less than the $500 usage limit. This qualifies the member to accumulate a Carryover Max benefit for the following year. In this case, the member can accumulate 25% of the remaining maximum, or $230 since $230 does not exceed the carryover limit of $500.

Year 2:
The available annual maximum is now $1,230 ($1,000 standard annual maximum plus $230 accumulated Carryover Max benefit). This year, the member has a dental cleaning for $80 plus $300 in other dental services, totaling $380. At the end of the year, the member has $620 of the maximum remaining. The member used less than the usage limit of $500 and had a dental cleaning and qualifies for a Carryover Max benefit again. In this case, the member can accumulate 25% of the remaining maximum, or $155 since it does not exceed the carry over limit of $500.

Year 3:
The available annual maximum is now $1,385. Accumulations will continue in a similar manner unless:
- The member does not receive an exam or cleaning during the benefit period, in which case the entire accumulated benefit is lost;
- The accumulated benefit equals the standard annual maximum ($1,000 in this example), in which case the member will have a $2,000 annual maximum available;
- The member is no longer eligible with Delta Dental of New Jersey. Benefits are not transferable.

Questions? Please contact our Customer Service Agents at 1-800-452-9310.
Good Health Starts with a Healthy Mouth

*If you have a history of periodontal disease, the Oral Health Enhancement Option offers extra cleanings each year to help protect your health*

Research shows a possible link between the presence of periodontal (gum) disease and serious chronic medical conditions. Our new Oral Health Enhancement Option helps members at risk for gum disease better manage their oral health—and help protect their overall health as well.

What the Oral Health Enhancement Option offers you

- Eligible members who have been previously treated for periodontal (gum) disease will receive up to four dental cleanings and/or periodontal maintenance procedures per benefit period. Most plans limit these treatments to two per year. (Please see your benefit summary regarding how many you are eligible for.)
- Managing periodontal disease may help you reduce tooth loss, and avoid the pain and expense of tooth replacement.

How does the program work?

- Eligible patients must have a claim history or submit evidence of having periodontal surgery or periodontal scaling and root planing.
- Members automatically qualify if they have had periodontal surgery or periodontal scaling and root planing while covered by Delta Dental. For members who have not had Delta Dental in the past, or newly eligible members, proof can be provided in one of three ways:
  - Sending a copy of an explanation of benefits from a prior insurance carrier that shows the most recent date(s) of periodontal surgery or periodontal scaling and root planing.
  - Sending a copy of a bill from the treating dentist that clearly shows the most recent date(s) of either periodontal surgery or periodontal scaling and root planing.
  - Having the dentist complete the “Oral Health Enhancement Option Qualification Form” and fax, mail, or email the form to Delta Dental of New Jersey.

Delta Dental of New Jersey is committed to offering benefits that contribute to the health and well being of our members. If you have additional questions, please contact Delta Dental of New Jersey at 1-800-452-9310.