## **Dental Insurance**

Plan Year: February 1, 2025 - January 31, 2026

PREVENTIVE CARE

Oliver offers two dental plans through Delta Dental. One is a DHMO plan and the other is a PPO plan. If you elect the DHMO plan, you will be automatically assigned a primary dentist by Delta Dental. You will be responsible for the cost of dental services obtained from a provider other than your assigned primary dentist. You may change your primary dentist by contacting Delta Dental Customer Service at 1-800-932-0783. The chart below provides a brief overview of the plans.

**DHMO: DeltaCare USA Network\*** 

Exams, X-rays, Cleanings, Fluoride Applications		\$0	
BASIC PROCEDURES			
Fillings (amalgam or resin-based composite)		\$0	
Sealants		\$10 per tooth	
MAJOR PROCEDURES			
Crowns, Root Canals		\$95 - \$335	
Plan Year: February 1, 2025 – January 31, 2026		PPO: Delta Dental PPO	
DEDUCTIBLE			
Individual / Family		\$50 / \$150	
ANNUAL MAXIMUM			
Per covered person		\$1,000	
PREVENTIVE CARE			
Oral Exams & Cleanings (twice per calendar year), X-Rays (full mouth once per three-year period)		<b>\$</b> O	
BASIC PROCEDURES			
Fillings, Root Canals, Gum Treatments, Oral Surgery		You pay 20% after deductible	
MAJOR PROCEDURES			
Crowns, Inlays, Bridges, Dentures, Implants		You pay 50% after deductible	
BI-WEEKLY COST FOR COVERAGE	рнмо	PPO	
Employee Only	\$0.00	\$7.66	
Employee + Spouse	\$0.00	\$15.93	
Employee + Child(ren)	\$0.00	\$15.26	
Employee + Family	\$0.00	\$23.53	

<sup>\*</sup>Primary care dentist in the DeltaCare network will need to be specified. This can be changed through the Delta online portal or by calling 1-800-932-0783, effective for the next month. Please see the plan guide for a full list of services.