

Craft

Group #000466

Plan Benefit Highlights			
Network(s)	Delta Dental PPO SM	Delta Dental Premier [®]	Non-Participating*
Calendar Year Plan Maximum Per person per calendar year	\$2,000	\$2,000	\$2,000
Lifetime Ortho Maximum Per eligible covered member	\$2,500	\$2,500	\$2,500
Deductible Per person per family per calendar year <i>No deductible for diagnostic and preventive services</i>	\$50/person \$100/family	\$50/person \$100/family	\$50/person \$100/family
Eligible Dependents	Spouse and Domestic Partners Dependent children up to age 26		
Covered Services	Dental Benefit Plan Coverage		
Diagnostic & Preventive Services Exams Cleanings X-rays Fluoride treatments Sealants	100%	100%	**100%
Basic Services Space maintainers Emergency treatment for relief of pain Amalgam restorations (silver fillings) Composite resin restorations (white fillings) on anterior (front) teeth and posterior (back) teeth	90%	90%	80%
Endodontics Root canal therapy on permanent teeth Pulpotomies on primary teeth for dependent children	90%	90%	80%
Periodontics Surgical/Nonsurgical periodontics	90%	90%	80%
Oral Surgery Surgical/Nonsurgical extractions All other covered oral surgery	90%	90%	80%
Major Restorative Crowns and Crown repair	50%	50%	50%
Prosthetic Repairs and Adjustments Denture adjustments and repairs Bridge repair	50%	50%	50%
Prosthetics Dentures (full and partial) Bridges Standard implant coverage	50%	50%	50%
Orthodontics Treatment for the prevention/ correction of malocclusion <i>Available for covered members, ages 8 to age 99</i>	50%	50%	50%

This is a summary of benefits only and does not guarantee coverage. For a complete list of covered services and limitations/exclusions, please refer to the Dental Benefit Plan Summary.

*Dentists who have signed a participating network agreement with Delta Dental have agreed to accept the maximum allowable fee as payment in full. Non-participating dentists have not signed an agreement and are not obligated to limit the amount they charge; the member is responsible for paying any difference to the non-participating dentists ****except Diagnostic & Preventive Services are paid at 100%.**



Make the Most of Your Benefits



Thank you for choosing Delta Dental of Nebraska as your partner in oral health. Dental insurance is designed to pay a portion of the costs associated with your dental care. Having dental insurance is essential to keeping your mouth healthy by providing access to preventive care, such as cleanings and X-rays, and helps cover extensive dental procedures such as crowns and fillings.

Online Tools for Members:

DeltaDentalNE.org/Kiewit



Save Money, Go In Network:

Search for a participating dentist or specialist, clinic or location. By seeking care from a Delta Dental network dentist, you will save the most money because the dentist is not allowed to bill you more than our allowable charge.



The Power of Smile™ Oral Health Library

Learn about current topics and trends in dentistry and the importance of oral health as it relates to overall health from our team of experts.



Prefer to Speak to Someone?

Call our customer service

Toll Free: 1-866-827-3319

Monday–Friday: 7 a.m.–7 p.m. Central

Tools Available in the Secure Member Portal Effective 1/1/2023



Coverage Summary:

Review your dental plan information including eligibility, waiting periods, plan maximums and frequency limitations.



Claims Inquiries:

View claim status, procedure details, dates of service and applied deductibles.

View your Explanation of Benefits (EOB) online.

Check out our new feature to opt-out of the paper delivery of your EOB.



Print ID Cards:

Print a digital or replacement ID card.

Secure Member Portal Registration

1. On DeltaDentalNE.org/Kiewit and click “Access My Secure Portal”
2. Select the Employer Plan option click “Log In Here” and follow the steps to register.
3. Remember your username and password because you will need them each time you log in.

The Power of Smile™

Learn more about how your oral health connects to your overall health at:

DeltaDentalNE.org/Kiewit



Delta Dental of Nebraska

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