



Seton Hall University  
Group # 07742-00002  
Delta Dental PPO Plus Premier™

<b>Preventive &amp; Diagnostic</b>	100%
Exams (twice per calendar year)	
Cleanings (twice per calendar year)	
Bitewing X-rays (twice per calendar year)	
Full Mouth X-rays (once per three years)	
Fluoride Treatment (twice per calendar year, to age 19)	
Sealants, Space Maintainers, Perio Maintenance	
<b>Remaining Basic</b>	80%
Fillings, Simple Extractions, Endodontics (root canal)	
Periodontics, Oral Surgery, Repair of Dentures, Periodontics	
<b>Crowns &amp; Prosthodontics</b>	80%
Crowns, Gold Restorations, Bridgework, Full & Partial Dentures, Implants	
<b>Calendar Year Maximum (per patient)</b>	\$2,000
<b>Calendar Year Deductible (waived on Preventive &amp; Diagnostic)</b>	
Per Person	\$50
Family Aggregate Deductible	\$100
<b>Orthodontic Benefits, full comprehensive treatment (Adult &amp; Children)</b>	50%
Lifetime Maximum (per patient)	\$2,000

Carryover Max<sup>SM</sup> 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 Max<sup>SM</sup> is easy and automatic.

- To qualify for Carryover Max<sup>SM</sup>, 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 Max<sup>SM</sup> benefit if less than half of the standard annual maximum is used in the prior benefit year.
- Carryover Max<sup>SM</sup> 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 Max<sup>SM</sup> 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 planing in the past. Details on how to qualify can be found in your benefit booklet.

In addition, members with defined medical conditions such as Diabetes, Cardiovascular Disease, Pregnancy or are undergoing certain Cancer treatments may qualify for up to two additional cleanings when certified by a physician or dentist.

Covered Persons with special health care needs may be eligible for additional services for: exams, hygiene visits, and dental case management, and sedation/anesthesia. Special health care needs include any physical, developmental, mental, sensory, behavioral, cognitive, or emotional impairment or limiting condition that requires medical management, healthcare intervention, and/or use of specialized services or programs. The condition may be congenital, developmental, or acquired through disease, trauma, or environmental cause and may impose limitations in performing daily self-maintenance activities or substantial limitations in a major life activity.

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<sup>®</sup> 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, visit [www.deltadentalnj.com](http://www.deltadentalnj.com) for a directory of participating dentists.

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.

This overview contains a general description of your dental care program for your use as a convenient reference. Complete details of your program appear in the group contract between your plan sponsor and Delta Dental of New Jersey, Inc. which governs the benefits and operation of your program. The group contract would control if there should be any inconsistency or difference between its provisions and the information in this overview. **2025**

# Everyone Deserves a Healthy Smile



Thank you for choosing Delta Dental of New Jersey!

Check out these helpful tips to navigate the easy-to-use online member tools on our website.

## MySmile®

Find tools that make navigating your Delta Dental benefits simple and secure. Plan members can create their account with or without an ID number.

## Find a Dentist

Locate a dentist near where you work or live at [DeltaDentalNJ.com/FAD](https://DeltaDentalNJ.com/FAD).

## View and Print ID Cards

Log in to MySmile® and download your ID card from your dashboard.

## Dental Care Cost Estimator

Find cost ranges for common dental care needs.

## Dental Central

Read articles on the connection between a healthy smile and overall well-being. Check out [grin! magazine](#), too!

There are two easy ways to register on MySmile®—from your computer or from your smartphone.

- 1 Visit [DeltaDentalNJ.com/MySmile](https://DeltaDentalNJ.com/MySmile) and click “Register.”
- 2 Choose if you’re a subscriber or dependent, and select “Continue” at the bottom of the page.
- 3 Register using either your street address or member ID, and select “Continue.”
- 4 Create a user name and password when prompted. Read and check the box to “Agree to Terms of Use” for our website. Click “Continue.” and you should receive a verification code within five minutes, but no longer than 24 hours.
- 5 Enter the code, and click “Continue.”
- 6 You now will be able to print an ID card and access your account using your newly created username and password!



Questions about your benefits or need help with online tools? Call **800-452-9310**.