

ITC Federal Frequently Asked Questions

1. Is there a network with Delta Dental?

- ITC Federal Dental Plan is a preferred provider program. This means you can obtain dental services from any dentist. The Plan covers the same services whether or not you use a network dentist, but your out-of-pocket costs will likely be lower when you use an in-network or participating dentist.
- There are two types of network dentists — **Delta Dental PPO™** and **Delta Dental Premier®**. You may select the dentist of your choice. However, you will receive the highest level of benefits available in your group's program by choosing a Delta Dental PPO dentist. In addition, your out-of-pocket costs will likely be lower if you use a participating dentist. If you choose a:

Delta Dental PPO Dentist

- Payment will be made directly to the dentist for covered benefits.
- Delta Dental's payment will be based on the Delta Dental PPO allowance for covered benefits.
- The dentist will accept Delta Dental's payment, plus any required co-insurance and deductible (if applicable) as payment in full for covered benefits.

Delta Dental Premier Dentist who is not a Delta Dental PPO Dentist

- Payment will be made directly to the dentist for covered benefits.
- Delta Dental's payment will be based on the Delta Dental PPO allowance for covered benefits.
- Delta Dental Premier Dentists have only agreed to accept the Delta Dental Premier allowance as payment in full. You will be responsible for any required co-insurance and deductible (if applicable) as well as the difference between the Delta Dental Premier allowance and the Delta Dental PPO allowance for covered benefits.
- The amount you would owe a Delta Dental Premier Dentist who is not a Delta Dental PPO dentist may be higher than the amount you would owe a Delta Dental PPO dentist for the same covered benefits.

Non-Participating Dentist

- Payment will be made directly to you (unless Virginia law requires otherwise).
- Delta Dental's payment will be based on Delta Dental PPO allowances for covered benefits.
- You will be responsible for any required co-insurance and deductible (if applicable) as well as the difference between the non-participating dentist's charge and Delta Dental's payment for covered benefits.
- The amount you would owe a non-participating dentist may be higher than the amount you would owe a Delta Dental PPO or Delta Dental Premier dentist for the same covered benefits.



Example:

NETWORK	PPO Network Dentist	Premier Network Dentist	Non-Participating Dentist
Dentist's Charge for Filling	\$90.00	\$90.00	\$90.00
Delta Dental's Plan PPO Allowance	\$70.00	\$70.00	\$70.00
Coinsurance Percentage	80%	60%	60%
Delta Dental's Payment	\$56.00	\$42.00	\$42.00
Delta Dental's Contracted Premier Plan Allowance	N/A	\$80.00	N/A
Patient Payment*	\$14.00	\$38.00	\$48.00

In this example, the patient's out-of-pocket cost is lower using a Delta Dental PPO Dentist.

All Delta Dental dentists agree to:

- Complete the dentist's portion of the claim form and submit the claim directly to Delta Dental.
- Accept Delta Dental's payment and any patient coinsurance as payment in full for covered benefits.
- Participate in Delta Dental's quality assurance programs.

2. What will happen if my dentist is not in the Delta Dental network?

- You will be responsible for paying the difference between the non-participating dentist's charges and Delta Dental's payment.
- You may also have to pay the non-participating dentist in advance for the entire bill and you may have to file the claim with Delta Dental.

3. How can I find out if my dentist is a Delta Dental PPOSM and/or a Premier dentist?

There are several ways to find out if your dentist is a network dentist:

- Call Delta Dental's Benefit Services Representatives at 1-800-237-6060. They are available Monday – Thursday 8:15 a.m. – 6:00 p.m. EST and Friday 8:15 a.m. to 4:45 p.m. EST.
- Check Delta Dental's website at DeltaDentalVA.com.
- Ask your dentist if he/she participates in the Delta Dental network. If yes, be sure to also ask whether he or she participates in both the Delta Dental PPO and Premier networks, or the Delta Dental Premier[®] network only.

4. How can my dentist enroll in the Delta Dental network?

Ask your dentist to contact the local Delta Dental in your state or have the dentist contact Delta Dental's Provider Relations Department at 1-800-367-3531.

5. Will I receive an ID card?

All employees who enroll in a Delta Dental plan will receive two new ID cards. You may obtain additional ID cards by calling Delta Dental's Benefit Services Department at 800-237-6060 or you can print a copy by visiting [DeltaDentalVA.com](https://www.DeltaDentalVA.com). To protect your privacy, only the employee's name and ID number will appear on the ID cards.

6. What do I need for my first dental appointment under the New Plan?

- Present your new ID card or give the dentist your Social Security Number.
- Tell the dentist your Dental Plan is administered by Delta Dental of Virginia.
- Claim forms are generally filed directly by the dental offices. Delta Dental will accept any standard ADA approved claim form. Claim forms are available at [DeltaDentalVA.com](https://www.DeltaDentalVA.com) or by calling Delta Dental's Benefit Services Department at 800-237-6060.

7. How can I avoid unexpected charges for dental care?

- See a dentist who participates in the Delta Dental PPO and/or Premier network.
- Ask your dentist to file a pre-determination of benefits before treatment begins (not required but recommended for services over \$250).
- Call Delta Dental's Benefit Services Representatives with any benefit clarification questions.

8. What if I met my annual deductible under the prior carrier dental plan- will I have to satisfy it again under Delta Dental's program?

No - Your deductible runs on a calendar-year basis, and if you met your deductible during 1/1/23-6/30/23, then you will not be required to meet it again. We will receive the prior carrier's deductible history, which will be loaded into our system.

9. What if I utilized my annual maximum under the prior carrier dental plan- will I receive a new annual maximum under Delta Dental's program?

No- Your annual maximum runs on a calendar year basis and doesn't begin anew when there is a carrier change. Any monies paid by the prior carrier from 1/1/23-6/30/23 would transfer to Delta Dental, which means you and your covered dependents will not receive a new \$1,000 annual maximum if the prior carrier paid the annual maximum of \$1,000.

10. How does Delta Dental handle work in progress, e.g., a root canal was performed prior to July 1, 2023, but the crown is placed AFTER July 1, 2023?

If you have a treatment in progress as you are joining Delta Dental, we aim for a smooth transition. Typical benefit categories that have procedures that may overlap carriers include endodontics (root canals) and major restorative services (crowns). Root canals and crowns often require several weeks for completion. If a root canal was performed prior to July 1, 2023, the prior carrier would be responsible for payment of the root canal claim. Delta would be responsible for payment of the crown placement — as long as the crown procedure has not begun prior to the effective date of July 1, 2023. If the tooth has been "prepped" (meaning work has begun on the crown procedure) prior to July 1, 2023 the claim should be paid by the previous carrier.