

Delta Dental of Wyoming Individual & Family Dental Plans - 2023



With 55 years of experience insuring healthy smiles across the state, Delta Dental of Wyoming knows what it takes to provide access to great dental care.

Delta Dental of Wyoming is the state's leading dental insurance company and the only one based in Wyoming.

We provide our subscribes with the convenience of local customer service backed by a statewide network of dental providers. Also, as a nonprofit company we give back to Wyoming communities by working to improve oral health across the state.

Choose Delta Dental and Unleash Your Smile Power!

How do I enroll? Enrollment information is available online at <u>deltadentalwy.org</u> or you can complete the application form and send it in to Delta Dental of Wyoming.

Payment Choices: Payments can be made monthly by electronic funds transfer (ACH) from your bank or annually by personal check or money order.

Coverage start date: Your coverage will begin the <u>first of the month after</u> we have received your application.

Dental network: To determine whether your dentist is in our network, visit <u>deltadentalwy.org</u> and click on the "Find a Dentist" tool. You are in the <u>Premier network</u>.

Contact Us

We have local customer service representatives to answer questions about your benefits.

• Phone: Toll Free: 800-735-3379 or Local: 307-632-3313

• Email: <u>customerservice@deltadentalwy.org</u>

Plan Options

Coverage is effective the first of the month after the application is received by Delta Dental

	Preferred Plan	Basic Plan	
Annual Maximum per person	\$1,200	\$1,000	
Annual Deductible per person	\$50	\$75	
Preventive Services			
Oral Exams			
Cleanings			
X-rays			
Bitewing x-rays	You pay 0% of the Procedure cost.	You pay 20% of the Procedure	
Full mouth x-rays		cost.	
Fluoride Treatment	Deductible does not apply.		
(Children only)		Deductible does not apply.	
Sealants (Children only)	*Check dental policy for specifics on		
Space Maintainers	coverages	*Check dental policy for specifics	
(Children only)		on coverages	
	asia Campiana (C. Mantha Waiting Bania d		
	asic Services (6-Month Waiting Period)		
Fillings (Amalgam) Composite Fillings (White)			
On anterior (front) teeth only	You pay 50% of the Procedure cost	You pay 50% of the Procedure	
Stainless Steel Crowns	after your deductible is met.	cost after your deductible is met.	
Simple Extractions	arter your deductible is met.	cost after your deductible is filet.	
Emergency Treatment for the	*Check dental policy for specifics on	*Check dental policy for specifics	
relief of pain	coverages	on coverages	
relief of pain	coverages	on coverages	
Major Services (12-Month Waiting Period)			
Oral Surgery			
(impacted teeth and/or wisdom			
teeth)	You pay 50% of the Procedure cost	You pay 50% of the Procedure	
Periodontics	after your deductible is met.	cost after your deductible is met.	
Root Canals			
Crowns/Crown Build ups	*Check dental policy for specifics on	*Check dental policy for specifics	
Bridges	coverages	on coverages	
Dentures			
Implants			
All maximums are on a calendar v	1 1 11 11 11		

All maximums are on a calendar year basis. Limitations are per person.

This chart provides only a brief description of services covered. The policy booklet will provide a more complete explanation of coverage, including limitations and exclusions. If there are differences between this schedule of benefits and the policy booklet, the policy booklet will govern.

Preferred Plan		
Annual Premium Rates (by check)		
Individual	\$505.80	
Individual + One	\$1,011.00	
Individual + Family	\$1,497.00	
Monthly Premium Rates (by monthly bank draft)		
Individual	\$42.15	
Individual + One	\$84.25	
Individual + Family	\$124.75	

Basic Plan		
Annual Premium Rates (by check)		
Individual	\$399.60	
Individual + One	\$799.20	
Individual + Family	\$1,198.20	
Monthly Premium Rates (by monthly bank draft)		
Individual	\$33.30	
Individual + One	\$66.60	
Individual + Family	\$99.85	