Navigating Northeast Delta Dental’s My Benefit Web Page for Patients

Follow these instructions to view your eligibility and benefit information.

Go to our web page www.nedelta.com

Select Patients in the top green ribbon

Select the purple LOG IN button to access the Patients page.
View benefit information. Special messages are noted in the box below Group Name.

Choose Select next to the Name of the covered member to view benefit information.

New: Individual available carryover benefits displays.

New: Individual HOW benefits display per qualification. Example below reflects Caries and Perio additional HOW benefits.

Perio additional HOW benefits

Caries additional HOW benefits
Benefits:

Benefits are listed by ADA Service Type.

Select underlined Service Type to see covered ADA procedure codes. These codes are specific to your plan.

Waiting Period will either display number of Months, MET or NONE.

Co-Pay:
The plan benefit reflects the patient’s responsibility per provider network.
Procedure Exceptions include group procedure codes with different waiting periods or copays.

<table>
<thead>
<tr>
<th>Procedure Exceptions</th>
<th>Waiting Period</th>
<th>Delta Dental PPO</th>
<th>Deductible Applies</th>
</tr>
</thead>
<tbody>
<tr>
<td>D0425 - Caries susceptible test</td>
<td>NONE</td>
<td>0%</td>
<td>NO</td>
</tr>
<tr>
<td>D0484 - Consultation on slides</td>
<td>NONE</td>
<td>0%</td>
<td>NO</td>
</tr>
<tr>
<td>D1310 - Nutritional counseling</td>
<td>NONE</td>
<td>0%</td>
<td>NO</td>
</tr>
<tr>
<td>D1320 - Tobacco counseling</td>
<td>NONE</td>
<td>0%</td>
<td>NO</td>
</tr>
<tr>
<td>D1330 - Oral hygiene instruction</td>
<td>NONE</td>
<td>0%</td>
<td>NO</td>
</tr>
<tr>
<td>D1550 - Recent space maintainer</td>
<td>NONE</td>
<td>0%</td>
<td>NO</td>
</tr>
<tr>
<td>D2391 - Resin based comp 1 surf</td>
<td>NONE</td>
<td>0%</td>
<td>NO</td>
</tr>
</tbody>
</table>

Maximums and Deductibles:

View benefit balances based on product type and dentist participation on the Maximums & Deductibles tab.

<table>
<thead>
<tr>
<th>Benefit Levels</th>
<th>Maximums &amp; Deductibles</th>
<th>Limitations</th>
<th>Claims</th>
<th>Pretreatment Estimate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Benefit Period: 01/01/2017 - 12/31/2017</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Benefit Balances:

**Delta Dental PPO**
- Individual: All Covered Classes (Excluding Ortho) $1600.00 per year, $755.80 remaining
- Individual: Orthodontics $1500.00 lifetime, $1500.00 remaining

**Delta Dental Premier**
- Individual: All Covered Classes (Excluding Ortho) $1600.00 per year, $755.80 remaining
- Individual: Orthodontics $1500.00 lifetime, $1500.00 remaining

**Out of Network**
- Individual: All Covered Classes (Excluding Ortho) $1600.00 per year, $755.80 remaining
- Individual: Orthodontics $1500.00 lifetime, $1500.00 remaining

Deductibles:

**Delta Dental PPO**
- Individual: All Covered Classes (Excluding Diagnostic & Preventive and Ortho) $50.00 per year, $0.00 remaining
- Family: All Covered Classes (Excluding Diagnostic & Preventive and Ortho) $100.00 per year, $0.00 remaining

**Delta Dental Premier**
- Individual: All Covered Classes (Excluding Diagnostic & Preventive and Ortho) $50.00 per year, $0.00 remaining
- Family: All Covered Classes (Excluding Diagnostic & Preventive and Ortho) $100.00 per year, $0.00 remaining

**Out of Network**
- Individual: All Covered Classes (Excluding Diagnostic & Preventive and Ortho) $50.00 per year, $0.00 remaining
- Family: All Covered Classes (Excluding Diagnostic & Preventive and Ortho) $100.00 per year, $0.00 remaining

Limitations:
Select this tab to view covered procedures, time frequency and the procedure search feature.

New feature Procedure Search replaces Recent Treatment summary tab.

**Procedure Search:** D [ ] - Tth # (optional): [ ] Search [ ] Tooth Chart

Enter a valid procedure code in the box following the “D” and refine your search by adding a tooth number in the box following the Tth# (optional), and select Search button. Please enter a two digit number or letter in the Tth# (optional) field.
Example:

**Procedure Search:** D1110 - Tth # (optional):  

Limitations information:

Procedure: D1110 (Prophylaxis-adult)
- Time Limitation: 2 in a 12 month period
- Age Limit Low: 0
- Age Limit High: 0
- Procedure Grouping: D1110, D1120, D4346, D4355, D4910

**Recent Treatments (last 4):**

- 06/22/2017 (D1110)
- 09/08/2016 (D1110)
- 02/05/2015 (D1110)
- 07/24/2014 (D1110)

**Procedure Search:** D2391 - Tth # (optional):  

Limitations information:

Procedure: D2391 (Resin based comp 1 surf)
- Time Limitation: 1 in a 24 month period
- Age Limit Low: 0
- Age Limit High: 0
- Procedure Grouping: D2391, D2392, D2393, D2394

**Recent Treatments (last 4):**

- 10/20/2016 (D2391) - Th: 31 Surface(s): L
- 09/08/2016 (D2391) - Th: 31 Surface(s): B
- 08/07/2014 (D2393) - Th: 31 Surface(s): MOL
- 08/07/2014 (D2392) - Th: 29 Surface(s): DO

Please note you cannot search by tooth number alone. If code is not covered, it will return as a non-covered service.

**Procedure Search:** D1352 - Tth # (optional):  

1352 is a non covered service

Service Type displays Frequencies and Limitations.

<table>
<thead>
<tr>
<th>Procedure Exceptions</th>
<th>Frequencies</th>
<th>Limitations</th>
</tr>
</thead>
<tbody>
<tr>
<td>D0425 - Caries suscept test</td>
<td>1 in a 12 month period</td>
<td></td>
</tr>
<tr>
<td>D1310 - Nutritional counseling</td>
<td>1 in a 12 month period</td>
<td></td>
</tr>
<tr>
<td>D1320 - Tobacco counseling</td>
<td>1 in a 12 month period</td>
<td></td>
</tr>
<tr>
<td>D1330 - Oral hygiene instruction</td>
<td>1 in a 12 month period</td>
<td></td>
</tr>
<tr>
<td>D2910 - Recem partial cov rest</td>
<td>1 in a lifetime</td>
<td>Tooth/Quadrant/Arch limits apply</td>
</tr>
</tbody>
</table>

Procedure Exceptions display the codes that vary by Frequencies and Limitations.
Select the underlined Tooth Chart for your reference.

Claims:
Select the Claims tab to view claim details.
Choose Select next to the Name of the covered member who you want to view claim information.
Select View to see entire claim.
Pretreatment Estimate:

Select the Pretreatment Estimate tab to view estimates. Select View to see entire estimate.
Explanation of Benefits (EOB) is available for printing.

Select Print EOB button to view the Explanation of Benefits.