



What to look for in a dental insurance plan:

1. We are “**in-network**” with Delta Dental Premier, but we accept almost ALL insurance companies. (The exception being any state-issued insurance - examples included Title 19, Badger Care, or Medicaid.)
 - a. Make sure any other insurance companies allow you to see an “**out-of-network**” provider - most do, but better to check. Please note: Delta Dental Premier/PPO is ok.
2. **Maximum yearly benefit amount** - \$1000-2000 is a normal range
3. **Deductible** - \$25-100 is a normal range
4. **Frequency of cleanings** - 2 per year or every 6 months, sometimes up to 4 per year!
5. **Any waiting periods?**
6. **Look at your coverage**
 - a. Usual and customary percentages paid by insurance for the allowed amount dictated by your plan contract. These are normal ranges:
 - i. Prophy/Exam/X-rays: 80-100%
 - ii. Restorative/Basic procedures: 60-80%
 - iii. Crown & Bridge/Root canal/Perio: 50-60%
 - iv. Surgery/Implants:50%
 - v. Extras that are nice: Guards, TMJ, Ortho, Fluoride/Sealants >age 18
7. **Pay attention to what you are paying in premiums in relation to what they are offering for coverage.**
8. **For Medicare**
 - a. Dental benefit INCLUDED with your Medicare plan is not true dental insurance. It ONLY covers catastrophic or emergent events.
 - b. You must pay for a dental rider or supplemental dental plan (‘Part C’) to get normal dental coverage. **Remember: make sure you can see a provider OUTSIDE of the Medicare Advantage network!**
 - c. If you qualify for Medicare; you must add a dental rider that allows you to see an out-of-network provider, take out a supplemental dental plan through an independent individual plan (separate from Medicare), or sign up for our **Benefits Program**. Ask us for a brochure if interested!

Questions? Ask us! We are here to help.