

## Delta Dental of Illinois Individual Kids Basic Plan

(Children under age 19 only)

The Individual Kids Basic plan uses an Exclusive Provider Feature where benefits are paid only when a member uses a Delta Dental PPO dentist. Delta Dental PPO dentists cannot bill members for charges over the PPO allowed amount. There are no benefits when a member uses a non-Delta Dental PPO network dentist.

<b>Deductible</b> (benefit year; per person, applies to basic and major services only)	\$120
<b>Out-of-Pocket Limit</b>	\$350 per individual child
<b>Family Out-of-Pocket Limit</b> (for children under age 19)	\$700
<b>Covered Dental Services</b>	
<b>Preventive Services</b> <ul style="list-style-type: none"> <li>• Exams (limited to 2 per person in a benefit year)</li> <li>• Cleanings (limited to 2 per person in a benefit year)</li> <li>• Bitewing X-rays (limited to 2 per person in a benefit year)</li> <li>• X-rays (full mouth/panoramic - limited to 1 per person in 36 months)</li> <li>• Fluoride Treatments (limited to 1 per person in a benefit year, under age 19)</li> <li>• Space Maintainers (under age 19)</li> <li>• Sealants (under age 19)</li> </ul>	100% in-network/ 0% out-of-network
<b>Basic Services</b> <ul style="list-style-type: none"> <li>• Fillings/Amalgams</li> <li>• Simple Extractions</li> <li>• Gum Disease Treatment</li> <li>• Root Canals</li> <li>• Surgical Extractions</li> </ul>	50% in-network/ 0% out-of-network
<b>Major Services</b> <ul style="list-style-type: none"> <li>• Denture Relines and Rebases, Adjustments</li> <li>• Repairs to Crowns, Dentures and Bridges</li> <li>• Crowns</li> <li>• Complete and Partial Dentures</li> <li>• Fixed Bridgework</li> </ul>	50% in-network/ 0% out-of-network
<b>Enhanced Benefits Program</b> Offers additional coverage for individuals who have specific health conditions (including pregnancy, diabetes, high-risk cardiac conditions and suppressed immune systems) that can be positively affected by additional oral health care.	Included
<b>Orthodontia</b> (medically necessary orthodontia only) The ACA requires coverage for medically necessary orthodontia only. Predeterminations will be necessary to determine if there is any coverage for orthodontia under the Individual Kids Basic plan.	50% in-network/ 0% out-of-network

Visit [deltadentalil.com/healthalliance](http://deltadentalil.com/healthalliance) for monthly premiums and to enroll members or call 800-323-1743.

Delta Dental of Illinois individual plans are only available to Illinois residents.