DELTA DENTAL®

State of New Hampshire Retirees Delta Dental Program

Questions & Answers about the Plan Group #1777

1. Who is Eligible?

Retirees, their spouses, and children regardless of student status, until age 26. Incapacitated children can remain covered regardless of age.

2. How much does it cost to join the State of New Hampshire Retirees dental program?

The entire monthly cost for the program must be paid by the retiree upon enrollment. There is no State subsidy. (See the Benefit Summary and Enrollment Form for rates.)

3. What is a "Late Entrant?"

If you enroll when you are newly eligible, and your coverage is later terminated for any reason, when (and if) you re-enroll, waiting periods will apply, and you will be considered a Late Entrant.

4. What is a waiting period?

A waiting period is the period of time that must be met before you and/or your eligible dependents become eligible for specific dental benefits (six months for Basic services, and 12 months for Major services).

If you have determined that waiting periods apply, you will need to calculate when those benefits will be available.

For example, if you become eligible on January 1, and have a six-month waiting period for Basic benefits, effective July 1 you would have coverage for procedures that fall under the Basic category. To meet the waiting period, you will need to be eligible and enrolled for six full months.

5. If your spouse is still working and has a dental plan, can your spouse be enrolled in the retiree's dental plan?

Yes. Your spouse can also be enrolled through the retiree's dental program.

6. If I now have dental coverage through the COBRA (18 months extension) plan, can I enroll in the new plan without waiting for my COBRA benefit to expire?

Yes, and when you enroll with no break in coverage, you don't have to observe the 6-months/12-months waiting periods before full benefits (for Basic and Major services) become available.

7. What is the advantage of going to a participating Delta Dental dentist?

No balance billing; they'll do the paperwork for you, and they cannot charge up front for covered services.

8. How can I find out if my dentist participates with Delta Dental?

You may call our Customer Service department at 1-800-832-5700 or 603-223-1234 and ask. You may also ask your dentist, or visit our Web site at **www.nedelta.com** for an updated listing.

9. Where will my claims be processed?

All claims will be processed through the Northeast Delta Dental corporate office in Concord, NH. (Even though there are other Delta Dental Plans across the nation, the State of New Hampshire Retirees group is only associated with Northeast Delta Dental.) Claims should be forwarded to the address on the reverse side of your identification card.

10. What if my dentist doesn't participate with Delta Dental?

You do not have to choose a Delta Dental Participating Dentist. You may see any dentist you wish, participating or not. If you use the services of a nonparticipating dentist, the payment will be based on the Plan's allowance for nonparticipating dentists.

11. Can I use my dental benefit out-of-state?

Yes.

12. Please explain the $25 Deductible.

Major services are subject to a $25 deductible each calendar year, per covered person. This deductible does not apply to Diagnostic & Preventive or Basic services. Any expense incurred during the last three months of a calendar year which is applied against an individual's deductible will also reduce the deductible for the next calendar year.

13. How is the $1,200 calendar year maximum applied?

It is the maximum amount that will be paid by Northeast Delta Dental per enrolled person each calendar year, but not the part you must pay. For instance, if you have a $100 procedure, and Northeast Delta Dental pays $80, the $80 is the amount deducted from your annual $1,200 coverage maximum.

Inquiries: 1-800-537-1715; Ask for the Eligibility department.