



2022 CDPHP® Medicare Advantage Rider for Group Medicare Dental Coverage

DENTAL COVERAGE

Services	Cost Share
Preventive Services (cleanings)	\$0 per cleaning
Preventive Exam	\$0 per exam
Bitewing X-ray	\$0 per bitewing
Panoramic X-ray	\$10 per panoramic
Full-mouth X-ray	\$10 for full mouth
Restorative Services (crowns/fillings)	\$60–\$595

Limitations:

Prophylaxis (cleanings), limited to two per benefit year.

Comprehensive oral exams, limited to two per benefit year.

X-rays (full mouth, panoramic, bitewing, and intraoral), limited to two per benefit year.

Services are only covered through participating providers in Delta Dental’s network for CDPHP Medicare Advantage plans. If you visit a dentist that is not in our dental network, you will be responsible for 100% of the cost.

To find a participating provider and see a full list of restorative services, limits and exclusions, please visit Delta Dental’s website at <https://www.deltadentalins.com/cdphpmedicare> or call Delta Dental’s Customer Service Center toll-free at 1-800-592-0132. A Customer Service Representative can answer questions you may have about obtaining dental care, help you locate a Delta Dental Participating Provider in your dental plan network, explain benefits, check the status of a claim, and assist you in filing a claim.

Claims: Submit your receipt and proof of payment to Delta Dental P.O. Box 2105, Mechanicsburg, PA 17055-6999.

The terms of the *Evidence of Coverage* to which this Rider is attached shall remain in full force and effect, except as amended by this Rider.

Administered by:
Delta Dental of New York, Inc.



A REGISTERED MARK OF DELTA DENTAL PLANS ASSOCIATION