



www.deltadentalia.com

Delta Dental PPO plus Premier
Individual Choice Preventive Plus

January 1, 2017

ADDRESS BLOCK

Dear Delta Dental Customer:

Thank you for choosing Delta Dental of Iowa for your dental benefits. Taking care of your smile is important to maintaining your overall health. At Delta Dental, we are always looking for ways to provide you with the best dental benefits.

Starting in January 2017, **your new monthly premium will be \$XXX.XX per month and will not change through December 31, 2017.** The chart below displays how your rates will be calculated in 2017.

Benefit/ Rate Type	Current Member Enrolled	2017 Monthly Plan Type Rates	Rated Member Enrollment*	2017 Monthly Premium
Adult (21 & older)	XX	Rate	XX	XX
Child (20 & under)	XX	Rate	XX	XX
Total	XX		XX	XXX

* Families with three or more enrolled children under the age of 21 as of January 1, 2017 only have to pay premium for up to a maximum of three children. There is no maximum on the number of Adults (ages 21 and older).

Plan Changes in 2017. The following changes are being made to your 2017 plan:

- **Straighter Teeth – Medically Necessary:** Remove the word “monthly” from information on the orthodontic treatment plan. Payments for orthodontic services will be divided into payments over the course of the treatment.
- **Annual Open Enrollment:** The open enrollment date for plans purchased on the Iowa Health Insurance Marketplace will be November 1st.
- **Language Services:** If you or someone you are helping has questions about Delta Dental of Iowa, you can get help and information in one of the following languages at no cost – English, Arabic, Chinese, French, German, Hindi, Karen, Korean, Laotian, Pennsylvania Dutch, Russian, Serbo-Croatian, Spanish, Tagalog, Thai or Vietnamese.

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Updated: 9/2016

Delta Dental of Iowa | 9000 Northpark Drive | Johnston, IA 50131 | Telephone 515-261-5500

Delta Dental of Iowa complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability or sex. To review our full non-discrimination notice, go to www.deltadentalia.com/nondiscrimination.

Download and Print Your 2017 Benefit Certificate

To view the amendment to your Delta Dental plan and download an updated Benefit Certificate, go to www.deltadentalia.com/indpreventplus. You can also request a copy by contacting Delta Dental at (877) 423-3582 ext. 3 or email IndividualProduct@deltadentalia.com.

Financial Assistance. Children (up to age 19) may be eligible to receive financial assistance for their dental insurance through the government's Advanced Premium Tax Credits (APTCs). To determine eligibility, visit www.healthcare.gov. To receive financial assistance, you must enroll through Iowa's Health Insurance Marketplace at www.healthcare.gov during the open enrollment period (November 1, 2016 through January 31, 2017). If you need assistance enrolling through the Marketplace, contact the State's insurance navigator at (877) 809-0501.

Changing Your Policy. If you would like to make a change to your Delta Dental plan, please contact us at (877) 423-3582, ext. 3, Monday through Friday, 8:00 a.m. to 5:00 p.m. (CST). If you would like to cancel your policy, Delta Dental must receive written notice at least 20 days prior to your requested termination date. Terminations will always be the last day of the month. For instance, if you request a May 31st termination date, your written request must be received at Delta Dental on or before May 11th. If you cancel your policy, or if your coverage is terminated for any reason, you may not re-enroll in Delta Dental of Iowa's individual dental coverage for 24 months.

At Delta Dental, we are committed to helping you maintain a healthy smile and look forward to providing your dental benefits in 2017.

Sincerely,

The Delta Dental of Iowa Team