



## Broader Coverage. Richer Benefits. A Chance to Maximize Savings.

Delta Dental is our new dental vendor for 2024!

Delta Dental has the largest network of dentists nationwide. With the Delta Dental PPO + Premier™ plan, you'll be able to access services in two Delta Dental dentist networks (Delta Dental PPO™ and Delta Dental Premier®) or use out-of-network dentists. Your coinsurance, deductible, and maximum annual benefit will vary based on the network you use for a covered dental service. **That puts you in charge of making your money go further!**

### Why are my dental benefits changing?

We evaluated our dental vendors for their plan designs and pricing. After considering several vendors, we chose Delta Dental.

If you are enrolled with Cigna Dental through The Episcopal Church Medical Trust (Medical Trust), that coverage will not be offered after December 31, 2023.

### Why Delta Dental?

Delta Dental has

- the largest national network of dentists
- the broadest coverage specifically in rural locations.

### What are the key plan features?

- All Delta Dental plan options cover
  - ~ diagnostic care and preventive care
  - ~ three dental cleanings a year (four cleanings based on certain conditions)
  - ~ basic and major restorative services, subject to applicable coinsurance, deductibles, limitations, and exclusions.
- Orthodontia services have an enhanced in-network lifetime benefit in the Premium Plan and are also offered in our Comprehensive Plan.

### What are the advantages of using providers in the Delta Dental networks?

Providers in the Delta Dental PPO<sup>1</sup> and Delta Dental Premier networks have agreed to contracted rates, and you won't be charged more than your expected share of the bill.<sup>2</sup> **Using the Delta Dental PPO network<sup>3</sup> offers the highest annual maximum benefit, allowing you the most savings.** Using an out-of-network dentist may result in higher out-of-pocket expenses.

### What if I'm in the middle of dental work?

If you have questions about transition of care, call Delta Dental at 888-894-7059.

### How do I find an in-network dentist?

You can find an in-network dental provider, check your benefits, and access other helpful resources all in one place at [deltadentalins.com](http://deltadentalins.com).

### How do I enroll?

1. Learn more about what Delta Dental offers you at [cpg.org/deltadental](http://cpg.org/deltadental) or call 888-894-7059.
2. During Annual Enrollment season
  - ✓ Think about your oral hygiene needs.
  - ✓ Select a Delta Dental plan for you and your eligible dependents if you want dental coverage through the Medical Trust in 2024.
  - ✓ Sign in to **MyCPG Accounts** at [cpg.org](http://cpg.org) to enroll in a Delta Dental plan by your Annual Enrollment deadline.

### Questions about Delta Dental coverage?

Call 888-894-7059.

Scan the code to learn more about Delta Dental plans.



# Benefit Highlights: Delta Dental PPO Plus Premier <sup>TM</sup>

Plan Benefit Highlights for: The Episcopal Church Medical Trust (Delta Dental Comprehensive)

Group Number: 22379

Effective Date: 1/1/2024

Benefits	Delta Dental PPO dentists**	Delta Dental Premier dentists**	Non-Delta Dental dentists**
<b>Deductibles</b> per member each calendar year	No Deductible	No Deductible	\$100/ \$300
Deductibles waived for Diagnostic & Preventive?	No Deductible	No Deductible	Yes
Deductibles waived for Orthodontics?	No Deductible	No Deductible	No
<b>Maximums</b> Per member each calendar year	\$2,500	\$2,000	\$1,500
D&P counts toward maximum?	No		

Covered Services*	Delta Dental PPO dentists**	Delta Dental Premier dentists**	Non-Delta Dental dentists**
<b>Diagnostic &amp; Preventive Services (D&amp;P)</b> Exams, Cleanings, X-Rays, Sealants and Space Maintainers	100%	100%	100%
<b>Basic Services</b> Fillings, Simple Extractions, Posterior Composites and Denture Repair/Reline/Rebase	85%	85%	75%
<b>Endodontics</b> Root Canals	85%	85%	75%
<b>Periodontics</b> Surgical and Non-Surgical Periodontics	85%	85%	75%
<b>Oral Surgery</b>	85%	85%	75%
<b>Major Services</b> Crowns, Inlays, Onlays and Cast Restorations	50%	50%	40%
<b>Prosthodontics</b> Bridges and Dentures	50%	50%	40%
<b>Implants</b> Implant Services	50%	50%	40%
<b>Orthodontic Services</b> Adults and Dependent Children	50%	50%	40%
<b>Orthodontic Maximums</b>	\$1,500 Lifetime	\$1,500 Lifetime	\$1,000 Lifetime

All deductibles, plan maximums and service specific maximums cross-accumulate between in and out of network. Benefit frequency limitations are based on the date of service and cross-accumulate between in and out of networks.

\* Limitations or waiting periods may apply for some benefits; some services may be excluded from your plan. Reimbursement is based on Delta Dental maximum contract allowances and not necessarily each dentist's submitted fees.

\*\* Reimbursement is based on PPO contracted fees for PPO dentists, Premier contracted fees for Premier dentists and program allowance for non-Delta Dental dentists.

<b>Delta Dental of Pennsylvania</b> One Delta Drive Mechanicsburg, PA 17055	<b>Customer Service</b> 888-894-7059 deltadentalins.com	<b>Claims Address</b> P.O. Box 2105 Mechanicsburg, PA 17055-6999
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This benefit information is not intended or designed to replace or serve as the plan's Evidence of Coverage or Summary Plan Description. If you have specific questions regarding the benefits, limitations or exclusions for your plan, please consult your company's benefits representative.



ECMT Delta Dental  
Member Information



Revised 9/8/2023

# Benefit Highlights: Delta Dental PPO Plus Premier <sup>TM</sup>

Plan Benefit Highlights for: The Episcopal Church Medical Trust (Delta Dental Premium)

Group Number: 22379

Effective Date: 1/1/2024

Benefits	Delta Dental PPO dentists**	Delta Dental Premier dentists**	Non-Delta Dental dentists**
<b>Deductibles</b> per member each calendar year	No Deductible	No Deductible	\$50/ \$150
Deductibles waived for Diagnostic & Preventive?	N/A	N/A	Yes
Deductibles waived for Orthodontics?	N/A	N/A	No
<b>Maximums</b> Per member each calendar year	\$3,000	\$2,500	\$2,000
D&P counts toward maximum?	No		

Covered Services*	Delta Dental PPO dentists**	Delta Dental Premier dentists**	Non-Delta Dental dentists**
<b>Diagnostic &amp; Preventive Services (D&amp;P)</b> Exams, Cleanings, X-Rays, Sealants and Space Maintainers	100%	100%	100%
<b>Basic Services</b> Fillings, Simple Extractions, Posterior Composites and Denture Reline/Repair/Rebase	85%	85%	75%
<b>Endodontics</b> Root Canals	85%	85%	75%
<b>Periodontics</b> Surgical and Non-Surgical Periodontics	85%	85%	75%
<b>Oral Surgery</b>	85%	85%	75%
<b>Major Services</b> Crowns, Inlays, Onlays and Cast Restorations	85%	85%	75%
<b>Prosthodontics</b> Bridges and Dentures	85%	85%	75%
<b>Implants</b> Implant Services	85%	85%	75%
<b>Orthodontic Services</b> Adults and Dependent Children	50%	50%	40%
<b>Orthodontic Deductible</b>	No Deductible	No Deductible	\$50 Lifetime
<b>Orthodontic Maximums</b>	\$2,000 Lifetime	\$2,000 Lifetime	\$1,500 Lifetime

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