2027 Delta Dental orthodontia rider

Delta Dental of Oregon & Alaska

Voluntary Adult Ortho 1500	
Lifetime maximum	$1,500
	What members pay
Members age 19+	50%
Members under age 19	Not covered

Services subject to a 18-month exclusion period.

How to use this dental benefit
When you go in for dental care, tell your provider you are a Delta Dental of Alaska dental member.

Pre-determination
Your dental office can submit a pre-treatment plan to Delta Dental of Alaska on your behalf. We will return it to them indicating the dollar allowance that will be covered by your plan before you go forward with treatment.

This document is provided for informational purposes only, and is intended as a quick reference of Delta Dental of Alaska plan benefits. For cost and additional details of the coverage, including exclusions, any reduction or limitations and the terms under which the policy may be continued in force, contact your producer or Delta Dental.

This is a summary of the dental plan benefits and is not a contract. If there is any discrepancy between the information in this summary and the contract, it is the contract that will control.

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