# Delta Dental PPO<sup>™</sup> Delta Dental Premier<sup>®</sup>

# Go Paperless

View your documents online



#### Why go paperless?

- **It's convenient.** Get your claim statements and other important plan documents online. You'll receive an email alert when a new document is available.
- It saves paper. You'll reduce your ecological footprint.
- It's faster. No need to wait for documents to arrive in the mail.
- It's easy. Updating your settings takes only a few minutes.

#### How do I change my settings?

Visit **deltadentalins.com**. Log in to your account. (If you don't already have one, click **Register Today** to sign up.)

- 1. Click the My Profile tab.
- 2. Go to the Go Paperless section.
- 3. Select Online and click Save.

				12.0.0.50 Contact Us Logout						
	ELTA DEN	TAL		Friday, November 11, 2016 - 3:19 PM						
and the second				•						
Home	Benefits	Claims	Documents Me	lembership My Profile						
My Profile		EDIT PROFILE								
Edit Profile		Help us keep your information secure. Keep your profile current. Use of this portal is governed by the Terms and Conditions.								
			* Username	mbrown78						
			* First Name	Mary						
			* Last Name	Brown						
			* Email Address	mbrown@gmail.com						
			Create New Password (case sensitive)	58-						
			Confirm New Password							
			* Challenge Question	Mother's maiden name?						
			* Challenge Answer	Williams						
		2	Go Paperless							
			Choose online delivery to re	receive an email notification when you have a new document. You'il need to login to get the personal information in unsecured email. <u>Learn more</u>						
			I want my plan documents	s delivered:						
		3	Online	By Mail : : :						
			Plan documents include official correspondence only. The specific documents depend on your plan type and may include: policies, evidence of coverage, certificates of coverage, claims information, billing and invoices.							
			By requesting to receive plan documents online, you acknowledge that you have read, understand and agree to the <u>Electronic</u> Documents Terms and Conditions.							
			Save	Cancel						

See the next page to learn how to download and read your electronic claim statements.



deltadentalins.com/enrollees

### Where can I find my claim statements?

To view your claim statements as PDFs, simply log in to your online account.

- 1. Go to **deltadentalins.com**. Log in.
- 2. Click **Documents** tab at the top.
- Choose the claim you want to view. A new window will pop up with the PDF, which you can save to your desktop for reference. (If the window doesn't pop up, make sure that your browser hasn't disabled pop-ups.)

Home Benefits	Claims	Docume	nts Membership My Profile						
Documents by Year		2016 Doc	uments						
2017		Issued 👻	- Description						
2016		10/27/2016	6 🔁 Claim Statement - JOHNSMITH						
2015		05/05/2016	6 🔁 Claim Statement – JOHN SMITH						
2014		Documents are PDF files. Use Adobe Acrobat plugin or compatible browser to view.							
2013									
2012									

You can also click the **Claims** tab to see claim information, but you can't download the statement as a PDF document.

## What's in my claim statement?

<b>#1 Claim number</b> : 20160255494511	A	B	C	D	E	F	G	Ð
PROCEDURE NUMBER AND TYPE OF SERVICE	SUBMITTED FEE (\$)	ACCEPTED FEE (\$)	MAXIMUM CONTRACT ALLOWANCE (\$)	AMOUNT APPLIED TO DEDUCTIBLE (\$)	PAID BY ANOTHER PLAN (\$)	Contract Benefit Level	DELTA DENTAL PAYS (\$)	PATIENT Pays (\$)
Date of service: January 1, 2016 Treatment type: Restorative (D2393) RESIN-BASED COMPOSITE - TWO SURFACES, POSTERIOR TOOTH Tooth: 30 Surface(s): B,O	280.00	255.00	255.00	0.00		80% Treating pro	204.00 ovider: JANICE	51.00 LEE
Date of service: January 1, 2016 Treatment type: Restorative (D2393) RESIN-BASED COMPOSITE - TWO SURFACES, POSTERIOR TOOTH Tooth: 31 Surface(s): D,O	280.00	255.00	255.00	0.00	-	80% Treating pro	204.00 ovider: JANICE	51.00 LEE
Claim total for JOHN SMITH	560.00	510.00	510.00	0.00	0.00		408.00	102.00

- A. **Submitted fee:** The amount charged by the dental office.
- B. Accepted fee: The total owed to the dentist, including your share and the amount paid by your dental plan.
- C. **Maximum contract allowance:** The total on which Delta Dental bases its payment portion.

<u>Note</u>: If you go to an out-of-network dentist, this amount may be lower than the accepted fee.

D. **Amount applied to deductible:** How much of your deductible you have fulfilled with the given procedure(s).

<u>Note</u>: Not all plans include a deductible (a fixed dollar amount you're required to pay before your coverage applies). E. **Paid by another plan:** The amount covered by your primary plan, if you have dual coverage.

<u>Note</u>: This column only applies if Delta Dental is your secondary plan (such as coverage through your spouse or second job).

- F. **Contract benefit level:** The percent of the maximum contract allowance that's paid by your dental plan.
- G. **Delta Dental pays:** How much your dentist is paid by your dental plan.
- H. **Patient pays:** How much you owe the dentist. This is what's left over from the accepted fee after your insurance covers its portion(s). If you've already paid this amount to the dentist, you're good to go.