Delta Dental Covers Me (DDCM) Individual and Family Plans

Sales Process

Q: How do I use my agency URL to sell off-exchange Individual and Family plans?

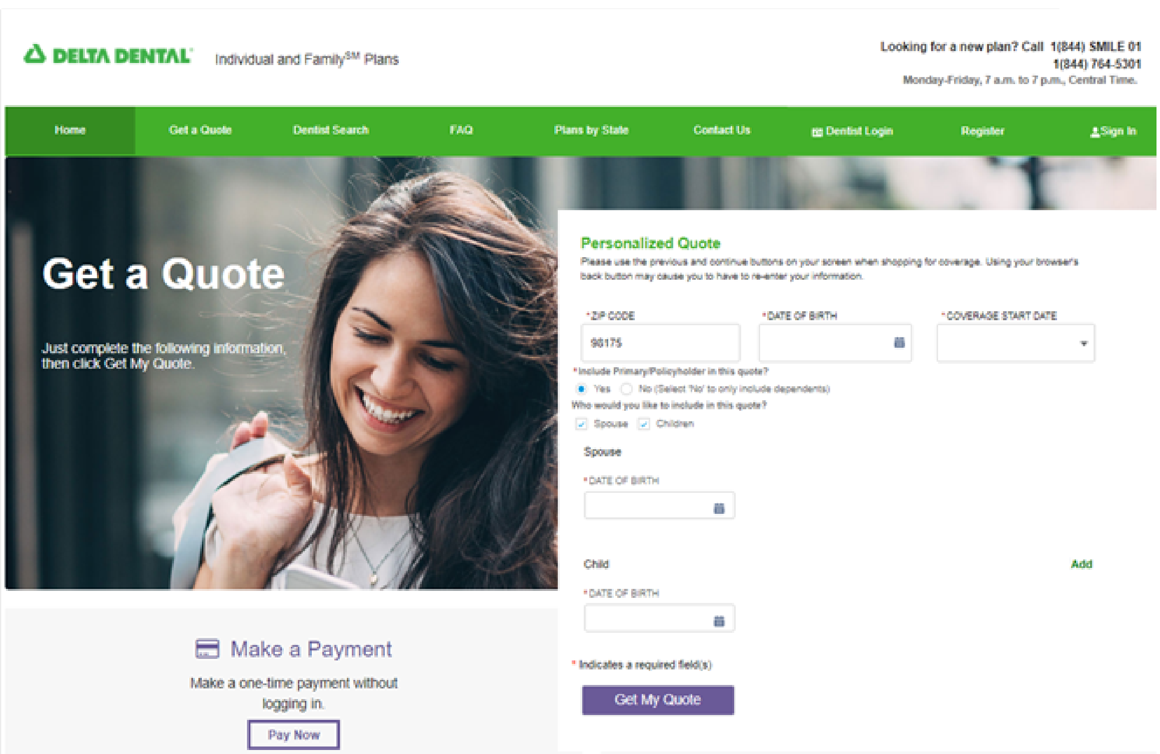
Step 1: Use the URL to navigate to DeltaDentalCoversMe.com. The URL will display in your browser's address bar. Enter zip code, date of birth and coverage start date. This is also the first step in the enrollment process.

Note: The URL is unique for your agency. All participating brokers at your agency share the same URL.

Steps 3-5: Your agency name displays after your client elects to enroll. The client selects your name from the drop-down menu on the Broker Information screen, then completes enrollment.

Here are screen shots:

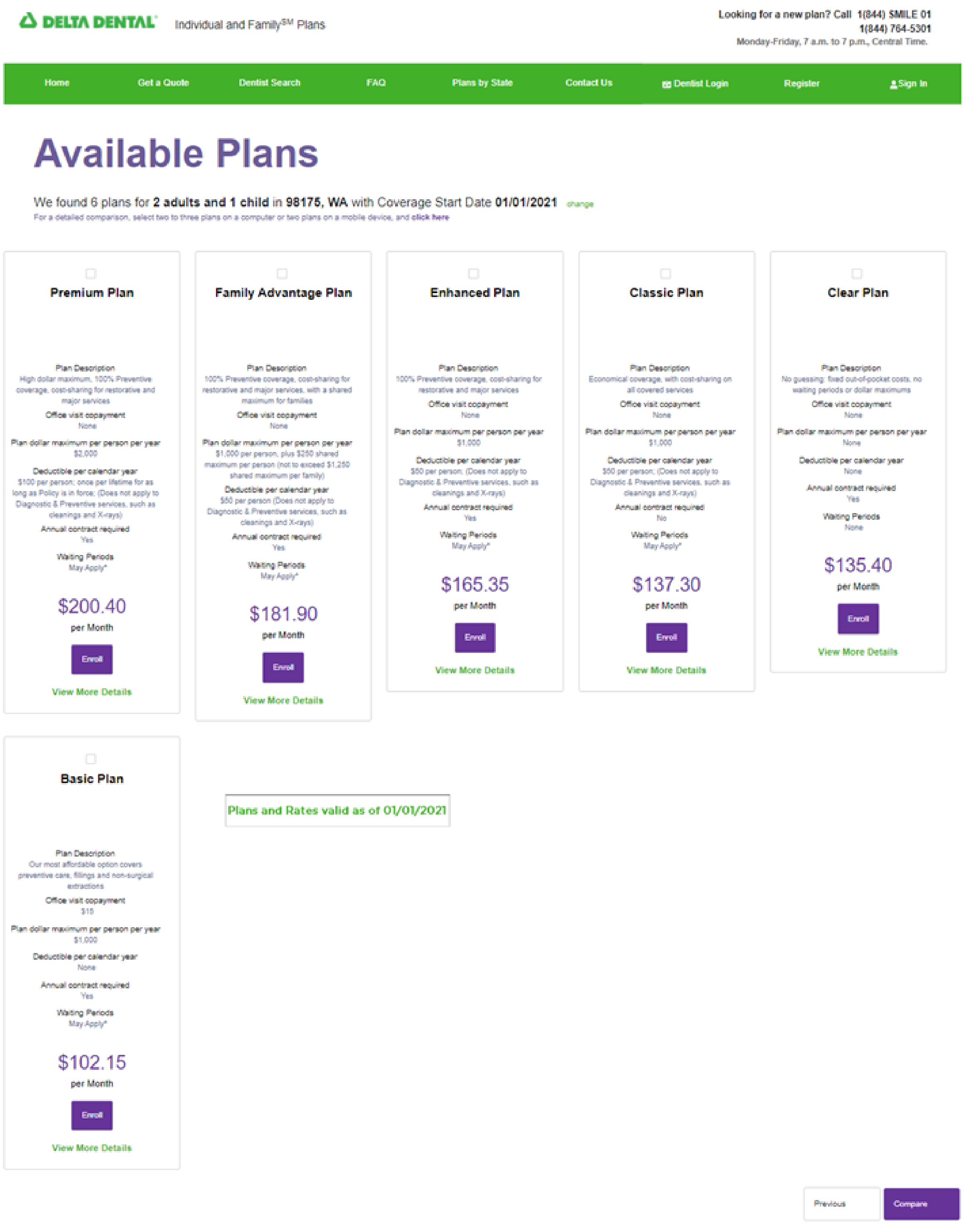
Step 1: Enter zip code, date of birth and coverage start date



DELTA DENTAL

Delta Dental of Washington

Step 2: Review available Dental plans and enroll



DELTA DENTAL Individual and Family℠ Plans

Looking for a new plan? Call 1(844) SMILE 01
1(844) 764-5301
Monday-Friday, 7 a.m. to 7 p.m., Central Time.

Home | Get a Quote | Dentist Search | FAQ | Plans by State | Contact Us | Dentist Login | Register | Sign In

Available Plans

We found 6 plans for **2 adults and 1 child** in **98175, WA** with Coverage Start Date **01/01/2021** change

For a detailed comparison, select two to three plans on a computer or two plans on a mobile device, and **click here**

Premium Plan

Plan Description
High dollar maximum, 100% Preventive coverage, cost-sharing for restorative and major services
Office visit copayment
None
Plan dollar maximum per person per year
$2,000
Deductible per calendar year
$100 per person; once per lifetime for as long as Policy is in force; (Does not apply to Diagnostic & Preventive services, such as cleanings and X-rays)
Annual contract required
Yes
Waiting Periods
May Apply*

$200.40
per Month
Enroll
View More Details

Family Advantage Plan

Plan Description
100% Preventive coverage, cost-sharing for restorative and major services, with a shared maximum for families
Office visit copayment
None
Plan dollar maximum per person per year
$1,000 per person, plus $250 shared maximum per person (not to exceed $1,250 shared maximum per family)
Deductible per calendar year
$50 per person (Does not apply to Diagnostic & Preventive services, such as cleanings and X-rays)
Annual contract required
Yes
Waiting Periods
May Apply*

$181.90
per Month
Enroll
View More Details

Enhanced Plan

Plan Description
100% Preventive coverage, cost-sharing for restorative and major services
Office visit copayment
None
Plan dollar maximum per person per year
$1,000
Deductible per calendar year
$50 per person; (Does not apply to Diagnostic & Preventive services, such as cleanings and X-rays)
Annual contract required
Yes
Waiting Periods
May Apply*

$165.35
per Month
Enroll
View More Details

Classic Plan

Plan Description
Economical coverage, with cost-sharing on all covered services
Office visit copayment
None
Plan dollar maximum per person per year
$1,000
Deductible per calendar year
$50 per person; (Does not apply to Diagnostic & Preventive services, such as cleanings and X-rays)
Annual contract required
No
Waiting Periods
May Apply*

$137.30
per Month
Enroll
View More Details

Clear Plan

Plan Description
No guessing: fixed out-of-pocket costs, no waiting periods or dollar maximums
Office visit copayment
None
Plan dollar maximum per person per year
None
Deductible per calendar year
None
Annual contract required
Yes
Waiting Periods
None

$135.40
per Month
Enroll
View More Details

Basic Plan

Plan Description
Our most affordable option covers preventive care, fillings and non-surgical extractions
Office visit copayment
$15
Plan dollar maximum per person per year
$1,000
Deductible per calendar year
None
Annual contract required
Yes
Waiting Periods
May Apply*

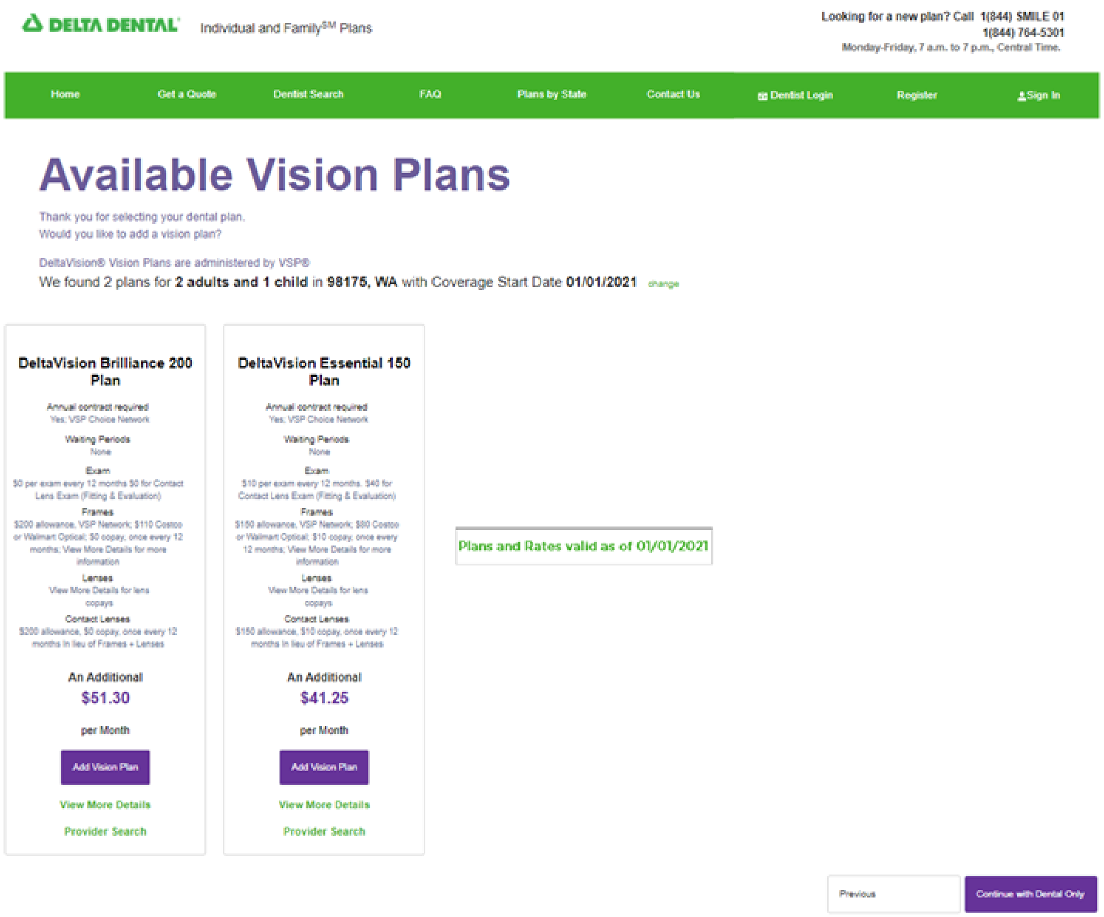
$102.15
per Month
Enroll
View More Details

Plans and Rates valid as of 01/01/2021

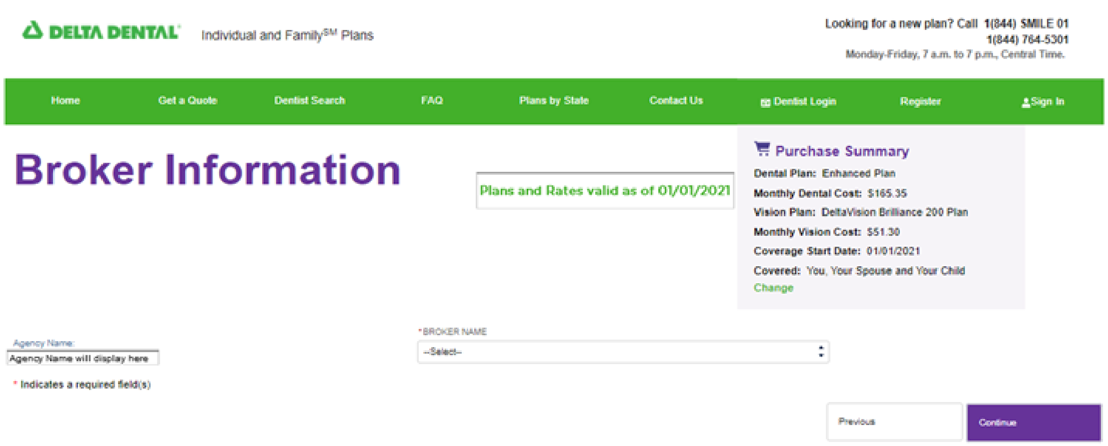
Previous | Compare

*Waiting periods may be waived on certain products if you currently have dental-insurance coverage. See policy for details.

Step 3: Review and select or decline optional Vision plans. Vision cannot be selected without dental.



Step 4: Select broker from drop-down list



Step 5: Your client enters required information to complete enrollment

Q: How will I know if clients have purchased a policy using my URL?

A: You will receive weekly emails with a list of all policies sold using your URL the prior week. You can also review your book of business using the broker portal feature at www.DeltaDentalCoversMyClient.com.

Q: What happens if a client signs up but doesn't use my URL?

A: If the unique URL isn't used, contact producer support at 844-335-8275 to have the account assigned to you. You will need the client's name and DOB to be assigned as broker of record.

Q: What if I experience issues with my URL?

A: Issues can be reported to individualfamilyurlsupport@deltadentalwa.com

Q: How can agencies share plan information with individuals?

A: Digital and print brochures have been created for you to share with clients. To request preprinted brochures contact individualfamilyurlsupport@deltadentalwa.com. Digital brochures are available through the broker resource page at deltadentalwa.com.

Q: Can my clients enroll by phone?

A: Yes. Refer your clients to the producer phone sales number 877-943-8335. The service representative will ask the client for the name of the referring producer and will assign the account for servicing and commission.

Q: What if I need to submit a paper application?

A: You will only receive commissions on applications submitted through your unique URL. For paper applications, you must comply with PCI regulations when in possession of a client's credit card number. Please refer to your brokerage house for more information about PCI regulations. mail the completed application and physical check to Delta Dental Billing and Enrollment PO Box 103 Stevens Point, WI 54481 Or, fax to 1-800-807-1970

Q: Can I be added as Producer of Record (also called Broker of Record) for policies that were sold using a paper application?

A: No, you cannot be added as Producer of Record on policies that were sold using a paper application. We encourage you to use your unique URL.

Q: How can I get my client's ID number?

A: Client ID numbers are in the weekly production report emailed to you the Monday following a sale. The ID number is also listed on your commission statements. You can also get your client's ID number by I&F producer support: IASCentralAdmin@deltadentalwi.com or 1-844-335-8275

DeltaVision

Q: When can my customer add optional DeltaVision® coverage?

A: New customers can add vision coverage at the time they enroll for dental. Current dental plan subscribers can add optional Vision coverage within 60 days prior to the dental plan renewal date. Enrollment for renewing subscribers is done easily by phone. Please call us at: 855-657-7873

Q: Do all household members covered under the Dental plan need to be included for optional Vision coverage?

A: Yes, Dental and Vision plans must have the same household members.

Q: Are Dental and Vision billed together?

A: Yes. Charges for dental and vision coverage will be itemized on your clients' monthly invoices.

Q: Will clients have the same ID number for their dental and vision plans?

A: No. The Vision ID number is unique. The Vision ID number will be shown on the policy declaration page.

Q: Which VSP network is used for these plans?

A: DeltaVision uses the VSP Choice network, plus access to multiple retailers, including Costco, Pearle Vision and Walmart. NOTE: Benefits are valid at Costco and Walmart warehouse locations only. Costco.com and Walmart.com are out-of-network.

Participating Providers can be found at VSP.com or by call VSP at 800-877-7195. Once enrolled, encourage your clients to activate a VSP web account and use the search feature from their account portal. This is the easiest, most reliable way to view all the network providers for your clients plan.

Q: Are there out of network benefits?

A: No. Services and products from out-of-network providers are not covered

Q: How my clients activate a web account at VSP.com?

A: Advise your clients to visit VSP.com and select the Log in / create an account link at the top of the home page. Follow the prompts to set up the new account, using the ID number provided on the declaration page of the new Vision policy.

Q: Who should I contact with questions?

A: If you have questions prior to enrollment in a vision plan, please call Delta Dental Covers Me at 877-943-8335. Once enrolled, please contact VSP at 800-877-7195.

Plan Information

Q: What are the methods of payments for premium?

A: Payment methods available through DeltaDentalCoversMe.com are: credit or debit cards (Visa, MasterCard or Discover) or bank draft/electronic funds transfer (EFT). Checks are NOT accepted for sales made using your URL.

Q: What are the premium modes?

A: Monthly, semi-annual, and annual

Q: If a client is submitting a paper application, can they submit a paper check?

A: Yes, clients submitting paper applications can submit a paper check for annual premium only. If your client would like a different payment frequency, they must choose a different payment method.

Q: What are the effective dates that a client can request?

A: When sold using your URL, your client can request an effective date up to 2-months future effective.

Example: You submit your client's application online on December 12. Your client can select an effective date of January 1 or February 1.

When sold using a paper application, your client will receive an effective date of the first of the month following approval of their application.

Example: You mail a paper application that is processed on December 12. Your client will receive an effective date of January 1.

Q: What is the last day of the month that an application can be submitted for an effective date of the first of the following month?

A: Credit/debit card applications must be received by the last business day of the month for an effective date of the first of the next month. When paying with bank draft/EFT, applications must be received by the 24th of the current month or the business day prior if the 24th is not a business day. If the application is received after the 24th, the plan will have an effective date of the 1st of the following month. This applies to applications submitted through your URL or via paper.

Example: An application received on the 27th of June with bank draft as the payment method will have an effective date of August 1st. That same application with credit card as the payment method can have either a July 1 or August 1 effective date depending on the applicant preference.

Q: Can an employer pay premiums for an employee?

A: No, an employer cannot pay premiums for an employee. For Basic, Classic, Enhanced, Family Advantage and Premium plans, only the Policyholder or other person covered by the plan can pay the plan premiums. For the Clear plan, a parent, guardian or similar person with insurable interest can pay the premium for a plan even if it does not cover that person.

Q: What is the contract period for the plans?

A: The Basic, Enhanced, Family Advantage, Premium and Clear plans have annual contracts. The Classic plan is a month-to-month contract.

Q: Can a member leave a plan mid-contract?

A: In most cases members cannot leave their plan mid-contract. When they purchase a Basic, Enhanced, Family Advantage, Premium or Clear plan, members are agreeing to keep the plan for at least 12 months. However, there are 3 reasons why a member can leave their plan mid-contract:

1) They become covered under a group plan at work,
2) The policyholder passed away, or
3) They enter into military service.

Q: Can a subscriber change plans at renewal?

A: Yes, they will need to submit an updated paper application. A paper app can be printed from the Deltadentalcoversme.com or requested from our Sales Department at 1-888-899-3736.

- Accompanied with a written cancellation request for the current policy.
- Include your producer information in section at bottom of the application:
    - Email to customersupport@deltadentalcoversme.com, or
    - Fax to 1-800-807-1970, or
    - Mail to Delta Dental Billing and Enrollment PO Box 103 Stevens Point, WI 54481

Q: Can Delta Dental terminate a plan mid-contract?

A: We can terminate a plan mid-contract for one of the following reasons:

1) Failure to pay premium,
2) A person covered by the policy commits fraud related to the policy, or
3) A person not covered by the policy uses the policy.

Q: Where should members call if they have questions about the plans or to terminate for one of the above 3 reasons?

A: They should call customer service at 888-899-3734 or email CustomerSupport@DeltaDentalCoversMe.com

Q: What number do I call with service questions about one of the Delta Dental of Washington Individual and Family Plans?

A: You should call producer service at 844-335-8275 or email IASCentralAdmin@deltadentalwi.com

Commission

Q: When can I start selling the Delta Dental of Washington Individual and Family Plans and receive a commission?

A: If you have completed and returned your producer appointment paperwork or work for a brokerage house that has, you are able to receive new sales commissions on policies. After you have received an email with your DeltaDentalCoversMe.com URL, you may begin selling Individual and Family plans.

Q: What is the new sales and renewal commission for Individual and Family plans?

A: The new sales and renewal commission on premium earned is 5% for dental and 10% for Vision.

Q: How will I be paid the new sales commission for Individual and Family plans?

A: Commissions are paid the month after premiums are received and will be included on the same check as commissions for any group business you have with us.

Example: A plan sold in November with a January 1 effective date:

	November	December	January	February	March	April
Premium Paid	For January		For February	For March	For April	For May
Commission Paid		For January		For February	For March	For April

Q: Will I get a notification when a client misses a payment or are terminated?

A: No, you will not receive a notification.

Q: Can I earn a commission for selling the Washington Family and Washington Kids plan on the Washington HealthPlanFinder?

A: Yes, a 5% commission is paid on Delta Dental plans sold on the Washington Health Benefit Exchange.

Broker Portal

Q: What is the broker portal?

A: The DeltaDentalCoversMe (DDCM) portal provides you with the information you need to support your Delta Dental of Washington Individual & Family plan clients. The portal is secure and can be accessed on mobile devices as well as on your computer. Use Google Chrome as your web browser for best results

Q: What information is available?

A: You have access to your book of business and client policy information:

- View your Active and Terminated policies
- View your clients billing history
- Download and Print ID cards and other policy documents
- Find your personal URL

Q: What online services can I conduct for my client?

A: you can service your accounts 24/7:

- Update premium payment methods
- Make a payment
- Update client contact information
- Submit plan changes and terminations

Q: How do I access the portal?

A: Accessing the portal is easy:

Step One: Get set up in our system

We need your NPN number for portal access. Please email your NPN information to IndividualFamilyURLSupport@deltadentalwa.com. In approximately 10 days you will receive a welcome email with a link to set your password.

Step Two: Enter your credentials into the portal

Log into the Portal at www.DeltaDentalCoversMyClient.com, enter your login credentials received in your welcome e-mail.

Q: Client not found in book-of-business?

A: Call or email producer service at 844-335-8275 or IASCentralAdmin@deltadentalwi.com