

# Orthodontia Plan II



 DELTA DENTAL

Delta Dental of Washington

## For Children

**Orthodontia Benefit:** 50% benefit

**Lifetime Maximum:** \$1,000

**Eligible persons:** Children  
(from birth to age 26)

**Orthodontic treatment** is appliance therapy necessary for the correction of teeth or jaws that are positioned improperly.

**The lifetime maximum** amount payable by Delta Dental for orthodontic benefits provided to an eligible child is \$1000. Not more than \$500, or one-half of Delta Dental's total responsibility shall be payable at the time of initial banding. The final payment of Delta Dental's responsibility shall be made during the seventh month following the initial banding, provided the employee is eligible and the dependent is in compliance with the age limitation.

**Delta Dental will pay** a constant 50% of the lesser of the maximum allowable fees or the fees actually charged for orthodontic benefits.

*Prior to commencement of treatment, an orthodontic treatment plan should be submitted to Delta Dental. Delta Dental will provide a confirmation of treatment and cost. This is not a guarantee of payment. Payment for orthodontic benefits is based upon eligibility. If an individual becomes ineligible prior to the payment of benefits, subsequent payment is not covered.*

### Covered Dental Benefits

Fixed or removable appliance therapy for the treatment of teeth or jaws. Orthodontic records: Exams (initial, periodic, comprehensive, detailed and extensive), x-rays (intraoral, extraoral, diagnostic radiographs, panoramic), diagnostic photographs, diagnostic casts (study models) or cephalometric films.

### Limitations

Payment is limited to:

- Completion, or to age 26, whichever comes first.
- Treatment received after coverage begins (claims must be submitted to Delta Dental within the time limitation of the start of coverage). For orthodontia claims, the initial banding date is the treatment date considered in the timely filing.

Treatment that began *prior to the start of coverage* will be prorated:

- Payment is made based on the balance remaining after the down payment and charges prior to the date of eligibility are deducted.
- Delta Dental will issue payments based on their responsibility for the length of the treatment. The payments are issued providing the employee remains eligible and the dependent is in compliance with the age limitation.

In the event of termination of the treatment plan prior to completion of the case, or termination of this program, no subsequent payments will be made for treatment incurred after such termination date.

### Exclusions

- Charges for replacement or repair of an appliance.
- No benefits shall be provided for services considered inappropriate and unnecessary, as determined by Delta Dental.

••Refer Also To General Limitations and General Exclusions in your Dental Plan Booklet••