

## WEBT – Standard Option Plan July 1, 2026

Benefits	PPO + Premier Network
<b>Maximum Benefit</b> (per eligible person, age 19 and over)	\$1,200.00
<b>Maximum Benefit (per dependent child to age 19)</b> Not subject to any lifetime or calendar year maximums. These services are still subject to the deductible.	Unlimited
<b>Orthodontic Maximum</b> (per unmarried dependent child to age 19)	\$1,500.00 lifetime
<b>Orthodontic Maximum</b> (medically necessary orthodontia) Not subject to any lifetime or calendar year maximums or deductibles. Must meet specific medically necessary requirements.	Unlimited
<b>Deductible</b>  ✓ Deductible does NOT apply to Diagnostic and Preventive or Orthodontic Services.	\$50 per person \$100 per family
Services	
<b>Diagnostic &amp; Preventive Services</b> <ul style="list-style-type: none"> <li>✓ Routine periodic examinations, including bitewing x-rays twice per calendar year.</li> <li>✓ Dental prophylaxis (cleaning) twice per calendar year.</li> <li style="text-align: center;"><b>OR</b></li> <li>✓ Periodontal maintenance not more than two per calendar year.                             <ul style="list-style-type: none"> <li>○ <b>Benefit is for either a prophylaxis/cleaning or periodontal maintenance. subscribers cannot utilize both.</b></li> </ul> </li> <li>✓ Topical fluoride applications once every twelve months. (Dependents to the end of the month age 19 is attained.)</li> <li>✓ Space maintainers, fixed. (Dependents to the end of the month age 19 is attained.)</li> <li>✓ Sealants. (Dependents to the end of the month age 19 is attained.)</li> <li>✓ Full mouth x-rays once every three years.</li> </ul>	100%
<b>Basic Services</b> <ul style="list-style-type: none"> <li>✓ Extractions and other oral surgery.</li> <li>✓ Amalgam, preformed crowns, synthetic porcelain, plastic, and composite restorations (fillings.)</li> <li>✓ Root canals.</li> <li>✓ Periodontics.</li> </ul>	80%
<b>Major Services</b> <ul style="list-style-type: none"> <li>✓ Crowns when teeth cannot be restored with a filling material.</li> <li>✓ Prosthetics - provides bridges, partial dentures, and complete dentures.</li> <li>✓ Dental implants.</li> <li>✓ Inlays &amp; Onlays</li> </ul>	50%
<b>Orthodontic Services</b> <ul style="list-style-type: none"> <li>✓ Limited to covered, unmarried children under the age of 19</li> </ul>	50%

### Additional Info:

- ✓ Visit our website at [www.deltadentalwy.org](http://www.deltadentalwy.org) or download the free Delta Dental app for iPhone or Android to see your benefits, your Explanation of Benefits or to find a dentist!
- ✓ You will receive two ID cards in your enrollment packet. If you need additional copies, please request one via the website or by calling our office at 800-735-3379.
- ✓ Verify your coverage. Login to your secure subscriber account on our website or our free mobile app to see your benefits and eligibility. If you think you may need treatment in excess of \$250, ask your dentist to submit a predetermination. That way you'll understand your full financial responsibility upfront.
- ✓ Your oral health is very closely related to your overall health. Preventive dental visits are an important way to maintain not just a healthy mouth but a healthy body as well.