





# Neighborhood Health Plan Preventive Dental Benefits for NHP Care Select and NHP Choice HMO Plans

Neighborhood Health Plan is pleased to offer this preventive dental benefit plan through an agreement with Delta Dental of Massachusetts. This benefit is to encourage great overall health by providing access to improved oral health through preventive dental care.

# Who is eligible?

All members of a participating NHP Care Select or NHP Choice HMO commercial plan and their dependents are eligible. For a complete list of participating plans, please visit the NHP Web site at www.NHP.org, or contact the NHP Customer Care Center at 1-800-462-5449.

## What is covered?

All services listed below are covered when performed by a Delta Dental PPO Network participating dentist.

#### Diagnostic:

Complete initial oral exam and charting –
Once every 60 months

#### Periodic Oral Exam and Cleaning:

Once every 12 months

#### X-rays:

Full mouth (complete set of X-rays) – Once every 60 months Bitewings (X-rays of back teeth) – Once every 12 months Periapicals (single tooth X-ray) – Once every 12 months

### Preventive:

Oral prophylaxis (cleaning, scaling and polishing of teeth) – Once every 12 months

## Fluoride treatments:

Once every 12 months for members under age 19

All of the services listed will be completely covered with no out-of-pocket expenses when performed by a Delta Dental PPO Network participating dentist. There is no coverage for these services if you visit a non-participating dentist.

The Delta Dental PPO Network is Delta Dental's network of preferred providers with over 2,100 dentist locations statewide. To find a Delta Dental PPO Network dentist in your area, visit our Web site at www.deltadentalma.com.

- Click on Find a Dentist.
- Select Click here to locate a participating dentist in Massachusetts.
- Choose "Delta Dental PPO" in the top box, and then your geographic information or dentist name in the boxes below.
- Click on Search Directory.
- A list of dentists that match your search criteria will be displayed.

If you have any questions about coverage or need to find a participating dentist, call Delta Dental toll free at **1-800-872-0500**.

Your ID card from Delta Dental of Massachusetts is enclosed. You won't have to file any claim forms – just show your ID card and the office will take care of the rest. Remember, services other than those listed above are not covered by this plan.

# How do I appeal a claim?

You may request a formal review of a coverage denial by writing to the following address within 180 days of receiving the notice of denial:

Delta Dental of Massachusetts P.O. Box 9695 Boston, MA 02114-9695

Delta Dental of Massachusetts, 465 Medford Street, Boston, MA 02129 | www.deltadentalma.com

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