







State of Delaware Dental Plan Comparison Chart for State Pensioners (Effective July 1, 2025)

(Lifective July 1, 2023)					
Plan Options	Delta Dental PPO Plan		Dominion National DHMO Plan***		
Plan Type	Preferred Provider Organization (PPO)		Dental Health Maintenance Organization (DHMO)		
Primary Care Provider (PCP) Selection	Not Required			Required	
Coverage Options/ Premiums (Rates)	Total Monthly Premium (Rate)			Total Monthly Premium (Rate)	
Individual	\$38.56			\$28.78	
Individual & Spouse	\$78.72		\$53.52		
Individual & Child(ren)	\$77.26			\$57.68	
Family	\$128.96		\$78.36		
Plan Feature	Delta PPO Dentists**	Delta Premier Dentists & Out- of-Network Dentists**		In-Network	Out-of-Network
Diagnostic and Preventive Services (exams, cleanings, x-rays)	100% covered, not subject to deductible	20% coinsurance, not subject to deductible		100% covered*	Not covered
Deductible (Per plan year)	\$50 per individual/ \$150 per family	\$50 per individual/ \$150 per family		N/A	N/A
Annual Maximum	\$1,500 per individual	\$1,500 per individual		N/A	N/A
Fillings	20% coinsurance after deductible	20% coinsurance after deductible		\$58 per filling (3 surface/silver)	Not covered
Root Canals	20% coinsurance after deductible	20% coinsurance after deductible	\$32	25 per root canal (anterior tooth)	Not covered
Crowns	50% coinsurance after deductible	50% coinsurance after deductible		\$495 per crown (porcelain/metal)	Not covered
Complete Dentures	50% coinsurance after deductible	50% coinsurance after deductible		\$664	Not covered
Implants, Surgical Placement	50% coinsurance after deductible	50% coinsurance after deductible		\$507	Not covered
Orthodontics (child)	\$50 lifetime deductible, \$1000 lifetime maximum	\$50 lifetime deductible, \$1000 lifetime maximum		\$3,764	Not covered
Orthodontics (adult)	\$50 lifetime deductible, \$1000 lifetime maximum	\$50 lifetime deductible, \$1000 lifetime maximum		\$4,024	Not covered

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Important Note:

- * Each family member who receives two cleanings during the plan year from a participating Dominion network dentist receives a \$20 reward.
- ** Reimbursement is based on PPO contracted fees for PPO dentists, Premier contracted fees for Premier dentists and 80th percentile for non-Delta Dental dentists.
- ***For the Dominion National DHMO Plan please refer to the summary of benefits for a complete list of ADA codes/fees and plan limitations/exclusions.

 $For more information, visit the Statewide Benefits \ Office \ (SBO) \ website \ at \ de.gov/statewide benefits.$