

# Texas A&M University System Student Dental

## Student Dental Plan PPO

<b>Deductibles</b>	\$25 per person / \$75 per family each plan year
Deductibles waived for Diagnostic & Preventive (D&P)?	Yes
<b>Maximums</b>	\$750 per person each plan year
D&P counts toward maximum?	Yes

Benefits and Covered Services*	DPO Dentists**	Non-Delta Dental DPO Dentists**
<b>Diagnostic &amp; Preventive Services (D&amp;P)</b> Exams, cleanings, x-rays and sealants	100%	100%
<b>Basic Services</b> Fillings	50%	50%
<b>Endodontics (Root Canals)</b> Covered Under Major Services	50%	50%
<b>Periodontics (Gum Treatment)</b> Covered Under Major Services	50%	50%
<b>Oral Surgery</b> Covered Under Major Services	50%	50%
<b>Major Services</b> Crowns, Inlays, Onlays and Cast Restorations	50%	50%
<b>Prosthodontics</b> Bridges and Dentures	50%	50%

\* Limitations or waiting periods may apply for some benefits; some services may be excluded from your plan. Reimbursement is based on Delta Dental maximum contract allowances and not necessarily each dentist's submitted fees.

\*\* Reimbursement is based on DPO contracted fees for DPO dentists, Premier contracted fees for Premier dentists and premier contracted fees for non-Delta Dental dentists

### Student Dental Plan Premiums

Annual Rate / Fall Rate / Spring-Summer Rate

Student	\$360 / \$120 / \$240
Student & Spouse	\$720 / \$240 / \$480
Student & All Children	\$1,080 / \$360 / \$720
Student & Family	\$1,440 / \$480 / \$960

Premiums are due at the time of enrollment.

**Enroll Online at:**

[tamusahpdental.myahpcare.com/enrollment](https://tamusahpdental.myahpcare.com/enrollment)

**Delta Dental Insurance Company**  
1130 Sanctuary Parkway, Suite 600  
Alpharetta, GA 30009

**Customer Service**  
800-521-2651

**Claims Address**  
PO Box 1809  
Alpharetta, GA 30023-1809