Dental Insurance

T&M offers three dental plans through Delta Dental. The chart below provides a brief overview of the plans.

Visit your benefits website, <u>www.tandmbenefits.com/dental</u>, for information on how to register for your account, login, and find in-network providers.

Delta Dental

1-800-335-8265 www.deltadentalnj.com

Plan Year: August 1, 2024 – July 31, 2025	PPO PLAN	PPO + PREMIER PLAN	ENHANCED PPO+ PREMIER PLAN
IN-NETWORK			
DEDUCTIBLE			
Individual / Family	\$25 / \$75	\$50 / \$150	\$75 / \$225
ANNUAL MAXIMUM			
Per covered person	\$1,750	\$1,500	\$2,500
DIAGNOSTIC & PREVENTIVE SERVICES			
Periodic Exams, Cleanings, X- Rays, Fluoride Treatments, Sealants	\$0	\$0	\$0
BASIC SERVICES			
Fillings, Root Canals, Oral Surgery	You pay 30% after deductible	You pay 40% after deductible	You pay 25% after deductible
MAJOR SERVICES			
Crowns, Inlays, Onlays	You pay 30% after deductible	You pay 50% after deductible	You pay 40% after deductible
ORTHODONTIA FOR CHILD			
Lifetime	You pay 50% after deductible		
Maximum per patient	\$1,000	\$1,000	\$2,000
DENTAL BI-WEEKLY PAYROLL DEDUCTIONS			
Employee Only	\$4.48	\$4.65	\$7.84
Employee + Spouse	\$8.57	\$8.91	\$15.00
Employee + Child(ren)	\$7.50	\$7.81	\$13.13
Employee + Family	\$14.23	\$14.80	\$24.89

All dental plans have a carryover maximum which allows you to carry over a portion of unused dollars from the previous year to spend on expenses the following year. Learn more at <u>www.tandmbenefits.com</u>.