

Frequently Asked Questions

About Delta Dental's 2021 Small Business Program Portfolio

1. How does Delta Dental's Small Business Program team support me in both the sales and service aspect of my role?

Delta Dental Sales account executives are available to assist you with training and can provide you with updates. They can help you explain what differentiates Delta Dental in the market, will send you updates and announcements about the program, and will help you complete the new group submission process. They're available to answer questions that you have about the plans and the program. [Contact a Sales account executive](#) for more information.

2. Do I need to be appointed before placing business with Delta Dental?

Appointment is not required in California, however you will need to register with Delta Dental before you can place business with us. You can start the registration process quickly and easily online by visiting our online producer portal. If you have questions about the registration process, [contact Producer Services by email](#) or by phone at 866-760-4080.

3. How are commissions paid, and whom do I contact for support with compensation?

Commissions are included in the standard market rates for each group sold, and are based on a percentage of the collected monthly premium. Commissions are paid directly by our third-party administrators (TPAs). Commissions are paid on a monthly basis. If you have questions or concerns about commissions, [contact your TPA](#).

4. Do certain plans have different enrollment forms?

Yes. Forms for the specific state in which the contract was issued, or change forms for PPO, DeltaCare USA, Core/Buy-Up and dual choice, are available through our general agents and account executives.

5. Can I sell the new Small Business Program portfolio to businesses with 100 or more employees?

No. Small Business Program plans are available only to businesses with fewer than 100 employees. For groups of 100 or more employees, [contact a Sales account executive](#).

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6. How do initial enrollment and termination work?

All eligible employees must enroll within 30 days of becoming eligible, within 30 days of losing other dental coverage or during an open enrollment period. If the group selects dependent coverage, the dependents may enroll when the employee initially enrolls, within 30 days of losing other dental coverage or during an open enrollment period. An employee who enrolls dependents must enroll all eligible dependents. Employee eligibility ends on the last day of the month in which full-time employment ends; dependent eligibility ends concurrently with the primary enrollee or when dependent status is lost or at the end of the month when the dependent reaches age 26 as indicated in the group contract.

7. What if my client has employees who live out of state?

Small Business Program PPO plans don't have out-of-state restrictions for enrollees. (A group must have at least one enrolled employee in the contract state who's authorized to sign the contract.) DeltaCare® USA plans cover enrollees only when the services are rendered in the contract state, except for emergency services.

8. How have PPO contribution requirements changed?

For PPO plans, the employer may choose to pay 50-100% of the premium under the employer-paid plans or 0-49% for voluntary plan selection. The employee contribution must be paid through payroll deductions. Employee contributions for voluntary plans must use pre-tax deductions. No changes have been made to DeltaCare USA contribution requirements.

9. What are the PPO participation requirements if the employer contributes 50-74.9%?

For employers who contribute 50-74.9% of PPO plan premiums, a minimum of 50% of all eligible employees, or five employees — whichever is greater — must enroll. For groups with fewer than five employees, a minimum of two employees must enroll. If enrolling fewer than five employees, use the 2-4 employee rates. There is no change to 74-99.9% contributions. For employer contributions of 100%, all eligible employees must enroll.

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10. Can a client with two enrollees purchase a dual choice plan?

No. Groups must meet the minimum enrollment participation under the Delta Dental PPO™ plans and the DeltaCare USA plan. Please refer to the Underwriting Guidelines section of our Small Business brochure for more details.

11. How is common ownership eligibility and rate level determined for groups with multiple businesses under one parent company?

The group must provide proof of common ownership and have the ability to submit a consolidated tax return. At least 51% of the groups must be from an eligible industry. The industry with the largest segment will define the rate level.

12. Dual choice PPO and Core/Buy-Up options are new for the Small Business Program. How does participation for these new plans work?

For employer contributions of 50-74.9%, at least 50% of eligible employees must enroll. For employer contributions of 75-99.9%, at least 75% of eligible employees must enroll. For 100% employer contribution, all eligible employees must enroll. All contribution levels, including 0-49.9%, must have a minimum of two employees enrolled in

each plan, with a combined minimum of five employees enrolled in both plans. Core/Buy-Up plans are not available for contributions less than 50%.

13. What rate tiers are available in the Small Business Program?

All plans are available with 3- or 4-tier rates.

14. Do you cover missing teeth?

Yes. Teeth missing before the plan's effective date are covered for all Delta Dental plans. Congenitally missing teeth are not covered.

15. How is orthodontic coverage changing in the new program?

Child-only orthodontic coverage is now available to groups of five or more employees for both employer paid and voluntary contributions. Refer to eligibility rules in the underwriting guidelines of the Small Business Program brochure or [contact a Sales account executive](#).

For 2021 effective dates, adult and child orthodontic coverage is available in Deluxe plans for employer-paid groups of more than 25 enrolled employees and voluntary groups of more than 50 enrolled employees.

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16. What other benefits are new for 2021?

Delta Dental's new portfolio of PPO plans will cover white resin fillings on all teeth beginning in 2021. SmileWay® Wellness Benefits for additional cleaning or gum care services are being included in our PPO plans for enrollees with qualifying medical conditions. There are new PPO plans to choose from, as well as new DeltaCare USA plans. We also offer more choices for voluntary groups and groups of 2-4 employees.

17. Can my group renew their current plan or do they have to move to a plan in Small Business Program 2021?

Your group can stay with their current plan(s). However, the current portfolio of plans will be closed to new sales for effective dates in 2021. If a group is satisfied with their current plan and doesn't want to change benefits or plan designs, they can keep their current plan. If they want to change benefits, the group must select a plan from the new portfolio.

18. Will the current underwriting guidelines, limitations and exclusions be grandfathered into the new portfolio?

No. The new portfolio's underwriting guidelines, limitations and exclusions will apply to new sales and renewing groups with benefit changes. They won't apply to groups renewing in their current plans without benefit changes.

19. Can I continue to sell the current portfolio of small business plans?

The current portfolio will be closed to new sales for 2021 effective dates. The last effective date for the current portfolio is 12/1/2020.

Our Delta Dental enterprise includes these companies in these states: Delta Dental of California — CA, Delta Dental of the District of Columbia — DC, Delta Dental of Pennsylvania — PA & MD, Delta Dental of West Virginia, Inc. — WV, Delta Dental of Delaware, Inc. — DE, Delta Dental of New York, Inc. — NY, Delta Dental Insurance Company — AL, DC, FL, GA, LA, MS, MT, NV, TX and UT.