

**OSMA Insurance Agency's** dental plan provides an excellent opportunity for Ohio State Medical Association (OSMA) members to obtain protection for themselves, their family and their employees.

Dental benefits not only encourage good oral health, they can serve as an excellent, affordable employee benefit. Whether the cost is paid by the employer or employee, the OSMA Insurance Agency's dental plan is worth considering as a new benefit.

**Eligibility**

OSMA members, their dependents, employees and their dependents, and OSMA members' surviving spouses may enroll in the dental program throughout the year per the continuous enrollment schedule (listed below). Applications will be processed by the date they are received by the OSMA Insurance Agency.

Date Received	Effective Date	Date Received	Effective Date
12/19-1/18	2/1	6/19-7/18	8/1
1/19-2/18	3/1	7/19-8/18	9/1
2/19-3/18	4/1	8/19-9/18	10/1
3/19-4/18	5/1	9/19-10/18	11/1
4/19-5/18	6/1	10/19-11/18	12/1
5/19-6/18	7/1	11/19-12/18	1/1

\*If the 18th of the month falls on a weekend or holiday, the application must be received the prior working day.



Dental benefits are a good idea!

**OSMA Insurance Agency  
Delta Dental Rates**

The following rates are monthly. Premiums are billed on a quarterly basis and are only guaranteed until December 31, 2019.

**INDIVIDUAL DELTA DENTAL PPO  
(POINT-OF-SERVICE)  
MONTHLY RATES**

Single (1 person)	\$58.00
Double (2 person)	\$108.00
Family (3 or more)	\$202.00

Dependent children can maintain coverage through age 25 if they are unmarried, full-time students and financially dependent on parents according to the IRS. Coverage for these dependents terminates at the end of the calendar year of their 25th birthday.



**For customer service or billing questions:**  
1-800-301-4568

**For enrollment:**  
1-800-860-4525

For more information about the insurance products and benefit services offered by the OSMA Insurance Agency, please visit our website at [www.osmains.com](http://www.osmains.com).



*Working to keep your practice independent!*



## **What is Delta Dental PPO?**

Delta Dental PPO<sup>SM</sup> (Point-of-Service) is a preferred provider organization that can reduce your out-of-pocket expenses if you receive care from a Delta Dental PPO or Delta Dental Premier<sup>®</sup> dentist. That's because these dentists have agreed to charge no more than an amount set by Delta Dental as their fee for a covered service. Participating dentists are paid directly by Delta Dental and you pay only the appropriate copayment, if any. In addition to the savings possibilities, this program gives you the following major advantages in selecting a dentist:

1. It's **flexible**. You can choose any dentist from Delta Dental's directory of participating dentists whenever you wish.
2. It offers you **freedom**. You and your eligible dependents are not required to use the same dentist. Each family member can have a different member dentist, if desired.
3. It's **easy to use**. You are not required to stay with your dentist for a certain length of time. You can change dentists whenever you like.

## **How do I find a dentist?**

To locate participating dentists near you, contact OSMA Customer Service at 1-800-301-4568, or use the online dentist search at [www.deltadentaloh.com](http://www.deltadentaloh.com).

## **How do I save money with my Delta Dental PPO (Point-of-Service) plan?**

Your out-of-pocket costs are likely to be less if you receive treatment from a Delta Dental PPO participating dentist. This is because Delta Dental PPO participating dentists have agreed to accept payment according to a schedule established by Delta Dental. And in most cases, this results in a reduction of their fees. Delta Dental may also pay a greater percentage for services if you go to a Delta Dental PPO participating dentist.

## **What if I go to a dentist who doesn't participate with Delta Dental PPO?**

If you go to a dentist who does not participate with Delta Dental PPO, you can still save money if that dentist participates with Delta Dental Premier. However, your coverage levels may be lower for many services.

There's a big advantage in choosing a Delta Dental participating dentist. If your dentist's usual fee for a covered service is higher than Delta Dental's customary fee, Delta Dental participating dentists can't charge you the difference. And this policy applies to all covered services, unlike some programs where dentists can choose to contract on some cases and not on others.

Please note that if your dentist does not participate with either Delta Dental PPO or Delta Dental Premier, Delta Dental will pay you and you'll be responsible for paying your dentist whatever he or she charges. You may also have to file your own claim forms.

## **How do I enroll?**

- Complete and mail the enclosed form
- Do not send premium with form. You will be billed for your first premium.
- All quarterly bills and information will be mailed to billing address listed on top of the enrollment form.
- Subscribers are required to remain enrolled for a minimum of 12 consecutive months.
- Enrollment form must be signed by OSMA member physician.
- List additional dependents on separate sheet.
- Mail to:  
OSMA Insurance Agency Dental Plan  
5115 Parkcenter Ave, Suite 205  
Dublin, OH 43017

**For customer service or billing questions:**  
1-800-301-4568

**For enrollment:**  
1-800-860-4525

**Delta Dental claims address:**  
Delta Dental of Ohio  
ATTN: Claims Submissions  
PO Box 9085  
Farmington Hills, MI 48333-9085

This brochure can provide only general information and plan highlights. This document is only a partial listing of benefits. This is not a contract of insurance. The policy provides a complete listing of covered services.