



Submitting a claim

If you visit an out-of-network dentist, here's everything you need to know to submit your claim.



With Delta Dental's large dental network, it's easy to find a local dentist who's right for you. But if you choose to visit an out-of-network dentist, we've still got you covered. With a Delta Dental PPO™ or Delta Dental PPO Plus Premier™ plan, you can always visit any dentist you'd like.

Here's how to submit your claim.

1. Log in to Delta Dental at **deltadentalins.com**.
2. Go to the **Claims & visits** page.
3. Click **"how to file a claim."**
4. Follow the step-by-step instructions to complete and mail your claim.

You can also refer to the complete instructions on the reverse side of this flyer.

After your information has been received, we typically process claims within 2-4 weeks. If we need more information, we'll reach out to you or your dentist.

Consider making your next appointment with a Delta Dental dentist.

Choosing a dentist who's in our network offers you several advantages:

- Your dentist submits your claims for you
- You'll save money
- You won't have to prepay for services
- You'll never be balance billed
- Your dentist has completed our rigorous credentialing process

To find a Delta Dental dentist, visit **deltadentalins.com**.

Delta Dental PPO and Delta Dental Premier are underwritten by Delta Dental Insurance Company in AL, DC, FL, GA, LA, MS, MT, NV, TX and UT and by not-for-profit dental service companies in these states: CA - Delta Dental of California; PA, MD - Delta Dental of Pennsylvania; NY - Delta Dental of New York, Inc.; DE - Delta Dental of Delaware, Inc.; WV - Delta Dental of West Virginia, Inc. In TX, Delta Dental PPO provides a dental provider organization (DPO) plan.



How to file a claim

Delta Dental dentists will handle all claims and paperwork for you. However, if you visit a non-Delta Dental dentist, you may need to file the claim yourself.

1. Fill out a claim form.

Open the **Delta Dental PPO™ claim form** and enter your information in the electronic form fields. Then, print the form to add your signature. Your dentist's signature is also required.

You may also print the blank PDF and fill out the form manually.

2. Attach a Statement of Treatment.

Ask your dentist for a copy of the Statement of Treatment or a detailed receipt that includes:

- Name, address and complete phone number of dentist
- Date each service was performed
- Description, procedure code and fee of each service performed
- List of affected teeth
- Total cost of services performed
- Dentist's National Provider Identifier (NPI)
- Dentist's Tax Identification Number (TIN)
- State license number
- Specialty code

If the Statement of Treatment or receipt is missing any of this information, please enter it on the claim form. A dental office staff member can provide you with the necessary information.

3. Make a copy for your records.

Make copies of the complete claim form and the Statement of Treatment or receipt. Keep them for your records.

4. Mail us your claim.

Using the address on your claim form, mail the original copies of the completed claim form and the Statement of Treatment or detailed receipt.

To find the correct mailing address, go to the "Select your Plan" menu at the top of the form. Select the Delta Dental company for your plan.

