

## Dental Insurance Quotes Apply Online or Call (855) 871-2242

	△ DELTA DENTAL
	Delta For Everyone Gold Plan
landini da cala	(PPO)
Individual:	\$39.28/mo
Individual +1:	\$71.86/mo
Family:	\$104.44/mo
	ENROLL NOW
Deductible:	\$50 Annual
Max. Annual Benefit:	\$1,000.00
	Plan Pays Year 1 Year 2 Year 3
Cleaning:	60% 80% 100%
	Waiting Period: 0 Months
X-ray:	Plan Pays         Year 1         Year 2         Year 3           60%         80%         100%
	Waiting Period: 0 Months
	Plan Pays Year 1 Year 2 Year 3
Filling:	50% 65% 80% Waiting Period: 6 Months
Root Canal:	Plan Pays Year 1 Year 2 Year 3
	0% 30% 50%
	Waiting Period: 12 Months
Crown:	Plan Pays Year 1 Year 2 Year 3 0% 30% 50%
Crown.	Waiting Period: 12 Months
Oral Surgery:	Plan Pays Year 1 Year 2 Year 3
	0% 30% 50%
	Waiting Period: 12 Months
Extractions:	Plan Pays         Year 1         Year 2         Year 3           0%         30%         50%
	Waiting Period: 12 Months
Dentures   Bridges:	Plan Pays Year 1 Year 2 Year 3
	0% 30% 50% Waiting Period: 12 Months
Implants:	No No
Orthodontia:	No
Vision Benefit:	No

Plan Highlights:		
Application Fee:	35.00	
Effective Date:	08/01/2025	
Dentist Search:	Dentist Search	
Plan Brochure:	View Plan Brochure	
	ENROLL NOW	