

# Delta Dental PPO™ — EPO Plan Design

What does a Delta Dental PPO — EPO Plan Design (EPO Plan) mean for our PPO providers? More patients in your dental chairs!

**Q. Is EPO a new network?**

A. No. EPO stands for Exclusive Provider Organization. While some Delta Dental member companies do have a separate EPO network, that is not the case for Delta Dental of Virginia. Delta Dental PPO — EPO Plan Design simply signifies a Delta Dental PPO™ product with no out-of-network benefits. If you are PPO, you are good to go!

**Q. What is the Delta Dental PPO — EPO Plan Design?**

A. The Delta Dental PPO — EPO Plan Design utilizes our PPO fee schedule for reimbursement with a fixed patient co-pay schedule. There are no out-of-network benefits, so members must see a PPO provider. Fixed co-pays mean no surprises for your patients!

**Q: What are the patient copayment amounts?**

A. For information on patient copayment schedules, call Provider Relations at 800.367.3531, ext. 3328.

**Q. How is the EPO Plan different?**

A. The EPO Plan is a fixed copayment plan with no deductible. Patients can reference their copayment schedule to know exactly what they will be paying for Diagnostic and Preventive, Basic and Major services. Orthodontic services will be covered by coinsurance instead of by copayment. The most significant difference for the member is that they must see a Delta Dental PPO dentist to receive their oral health care; however, they do not have to select a primary care provider or need a referral to see a specialist.

If you have questions, contact Provider Relations at 800.367.3531, ext. 3328 or your Network Specialist.