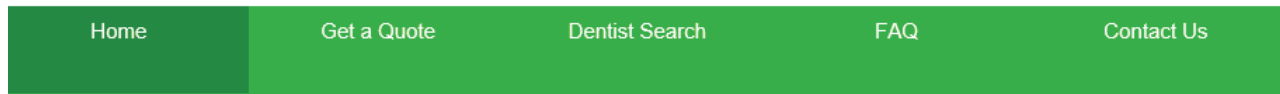


Step 2: Review available plans and enroll

Enhanced Plan	Classic Plan	Clear Plan
Office visit copayment: None	Office visit copayment: None	Office visit copayment: None
Plan dollar maximum per person per year: \$1,000	Plan dollar maximum per person per year: \$1,000	Plan dollar maximum per person per year: None
Deductible per calendar year: \$50 per person; \$150 per family; (Does not apply to Diagnostic & Preventive services, such as cleanings and X-rays)	Deductible per calendar year: \$50 per person; \$150 per family; (Does not apply to Diagnostic & Preventive services, such as cleanings and X-rays)	Deductible per calendar year: None
Annual contract required: Yes	Annual contract required: Yes	Annual contract required: Yes
Waiting Periods: May Apply*	Waiting Periods: May Apply*	Waiting Periods: None
\$58.42 per Month	\$45.14 per Month	\$38.00 per Month
Enroll	Enroll	Enroll
View More Details	View More Details	View More Details

Step 3: Your client enters required information to create an account

Step 4: Select broker from drop-down list



Broker Information

Agency Name:

XYZ AGENCY

* Indicates a required field(s)



Q: How will I know if clients have purchased a policy using my URL?

A: Clients will be listed individually on your commission statement.

Q: What happens if a client signs up but doesn't use my URL?

A: If the unique URL isn't used, you will not receive credit or commission for the sale. Your client must select your name from the drop-down list shown in the URL provided for you or your agency.

Q: What if I experience issues with my URL?

A: Issues can be reported to Commissions@DeltaDentalNJ.com. Include your client's information if you need to be assigned as the agent of record.

Q: How can agencies share plan information with individuals?

A: Digital and print brochures have been created for you to share with clients. The digital brochures have an editable field that enables you to customize the brochure with your contact information and unique URL.

Q: How do I request brochures?

A: Digital and print versions can be ordered by emailing Commissions@DeltaDentalNJ.com.

Q: What if I need to submit a paper application?

A: You will only receive commissions on applications submitted through your unique URL. For paper applications, you must comply with PCI regulations when in possession of a client's credit card number. Please refer to your brokerage house for more information about PCI regulations. Mail the completed application and physical check to:

Delta Dental Billing and Enrollment
PO Box 103
Stevens Point, WI 54481

Or, fax it to 800-807-1970 (checks cannot be faxed).

Q: Can I be added as Producer of Record (also called Broker of Record) for policies that were sold using a paper application?

A: No, you cannot be added as Producer of Record on policies that were sold using a paper application. You must use your custom URL to receive credit for the sale and be paid commissions.

Q: How can I get my client's ID number?

A: All members receive their ID number upon enrollment. The ID number is listed on your commission statements. You can also get your client's ID number by customer support: CustomerSupport@DeltaDentalCoversMe.com or 855-335-8275.

Plan Information

Q: What are the methods of payments for premium?

A: Payment methods available through DeltaDentalCoversMe.com are: credit or debit cards (Visa, MasterCard or Discover) or bank draft/electronic funds transfer (EFT). Checks are NOT accepted for sales made using your URL.

Q: What are the premium modes?

A: Monthly, semi-annual, and annual

Q: Where can I find premiums for Individual and Family plans?

A: You, and your clients, can use your unique URL to get quotes. Quoted premiums are based on the plan selected, ZIP Code, and number of dependents to be covered. Rates for some plans are based on the age of the policyholder or dependent on the policy effective date.

Q: What are the effective dates that a client can request?

A: When sold using your URL, your client can request an effective date of the first of the next month or the first of the month after.

Example: You submit your client's application online on December 12. Your client can select an effective date of January 1 or February 1.

Q: What is the last day of the month that an application can be submitted for an effective date of the first of the following month?

A: Credit/debit card applications must be received by the last business day of the month for an effective date of the first of the next month. When paying with bank draft/EFT, applications must be received by the 24th of the current month or the business day prior if the 24th is not a business day. If the application is received after the 24th, the plan will have an effective date of the 1st of the following month. This applies to applications submitted through your URL or via paper.

Example: An application received on the 27th of June with bank draft as the payment method will have an effective date of August 1st. That same application with credit card as the payment method can have either a July 1 or August 1 effective date depending on the applicant preference.

Q: Can an employer pay premiums for an employee?

A: No, an employer cannot pay premiums for an employee.

For New Jersey, the policyholder or other person covered by the plan can pay the plan premiums for Classic and Enhanced plans. A parent, guardian or similar person with insurable interest can pay the premium for the Clear plan even if it does not cover that person.

For Connecticut, the policyholder or other person covered by the plan can pay the plan premiums for Classic, Enhanced and Premium plans.

Q: What is the contract period for the plans?

A: For New Jersey, all contract periods are on an annual basis. For Connecticut, all contract periods are on a month-to-month basis.

Q: Can a member leave a plan mid-contract?

A: In New Jersey members cannot leave their plan mid-contract in most cases. When they purchase a Classic, Enhanced, or Clear plan, members are agreeing to keep the plan for at least 12 months. However, there are five reasons why a member can leave their plan mid-contract:

- 1) They become covered under a group plan at work,
- 2) The policyholder passed away, or
- 3) They enter into military service, or
- 4) If their marital status changes, or
- 5) If a civil union or domestic partnership status changes.

In Connecticut, a member may terminate at the conclusion of any month.

Q: Can you terminate a plan mid-contract?

A: Delta Dental can terminate a plan mid-contract for one of the following reasons:

- 1) Failure to pay premium,
- 2) A person covered by the policy commits fraud related to the policy, or
- 3) A person not covered by the policy uses the policy, or
- 4) A covered person fails to follow the terms of this policy.

Q: Can a subscriber change plans at renewal?

A: Yes, they will need to submit an updated paper application. A paper app can be printed from the Deltadentalcoversme.com or requested from our Sales Department at 888-899-3736. Submit the paper application by one of the following methods:

- Email to CustomerSupport@DeltaDentalCoversMe.com
- Fax to 800-807-1970
- Mail to Delta Dental
Billing and Enrollment
PO Box 103
Stevens Point, WI 54481

Q: Where should members call if they have questions about the plans or to terminate for one of the above reasons?

A: They should call 855-335-8275 or email CustomerSupport@DeltaDentalCoversMe.com.

Q: Does the Delta Dental mobile app work with Individual and Family plans?

A: Yes, it does.

Q: What number do I call with questions about one of the Delta Dental of New Jersey and Connecticut Individual and Family Plans?

A: You should call 855-335-8275 or email CustomerSupport@DeltaDentalCoversMe.com. For Commission questions, email Commissions@DeltaDentalNJ.com.