DELTA DENTAL OF OKLAHOMA

INDIVIDUAL AND FAMILY PLANS COMPARISON

Delta Dental of Oklahoma offers comprehensive Individual and Family plans designed to meet the needs of Oklahomans outside the workplace.

DELTA DENTAL PPO

2025 RATES HOLDING FOR 2026

2026 MONTHLY RATES

Individual	\$38.00
Individual + Spouse	\$76.00
Individual + Child(ren)	\$88.00
Family	\$130.00

UNIQUE FEATURES

- Delta Dental PPO Network typically results in the lowest out-of-pocket costs of all plans.
- Access to 56 percent of Oklahoma dentists through the Delta Dental PPO Network.
- No balance-billing within Delta Dental PPO Network.

BENEFITS WHAT YOU PAY

CO-INSURANCE FOR:

Preventive/Diagnostic Services	0%
Basic Services Initial 6-month specific benefit waiting period applies.	30%*
Major Services Initial 12-month specific benefit waiting period applies.	60%*
Orthodontic Services	N/A

*\$50 Annual Per Person Deductible Applies

MAXIMUMS	WHAT PLAN PAYS
Annual Per Person Maximum	\$1,000
Lifetime Orthodontic Maximum	N/A

Monthly Rates for Delta Dental PPO plan valid through 12-31-26

DELTA DENTAL PPO - POINT OF SERVICE

2026 MONTHLY RATES

Individual	\$68.00
Individual + Spouse	\$136.00
Individual + Child(ren)	\$177.00
Family	\$252.00

UNIQUE FEATURES

- Delta Dental PPO Point of Service plan provides complete freedom to visit the provider of your choice.
- In-network access to 95 percent of Oklahoma dentists through the Delta Dental PPO and Premier Networks.
- Includes orthodontic benefit for dependents to age 19.

BENEFITS WHAT YOU PAY

CO-INSURANCE FOR:	PPO NETWORK	PREMIER NETWORK	OUT-OF- NETWORK
Preventive/Diagnostic Services	0%	0%	30%
Basic Services Initial 6-month specific benefit waiting period applies.	20%+	30%+	50%+
Major Services Initial 12-month specific benefit waiting period applies.	50% ⁺	60%+	80%+
Orthodontic Services Initial 18-month specific benefit waiting period applies.	50%	50%	70%

*\$100 Annual Per Person Deductible Applies

MAXIMUMS	WHAT PLAN PAYS
Annual Per Person Maximum	\$1,500
Lifetime Orthodontic Maximum	\$1,500
Per covered dependent to age 19.	

Monthly Rates for Delta Dental PPO - Point of Service plan valid through 12-31-26

Endodontics, periodontics and oral surgery are all covered benefits under Basic Services in each plan. Benefits paid by the plan for covered oral evaluations and routine prophylaxis (cleanings) will not reduce your annual per person maximum for Preventive/Diagnostic Services, Basic Services and Major Services.

Si usted o alguien a quien asiste tiene preguntas y/o requiere servicios de traducción, póngase en contacto con Delta Dental de Oklahoma llamando al 405-607-4706 (OKC Metro) o al 800-522-0188 (gratuito). Nuestro equipo de atención al cliente atiende de lunes a jueves, de 7:00 a.m. a 6:00 p.m. y los viernes, de 7:00 a.m. a 5:00 p.m.