

Small Business Program Administrative “Quick Guide”



Have questions? Here’s what you’ll need to know to get the most from your Delta Dental Small Business program...

| Who to call . . . | Delta Dental PPO SM plus Premier or Delta Dental PPO Plans | DeltaCare [®] USA Plan |
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| <ul style="list-style-type: none"> ◆ Benefit questions ◆ Claims questions | Delta Dental (800) 932-0783 | Delta Dental (800) 422-4234 www.deltadentalins.com |
| <ul style="list-style-type: none"> ◆ Confirm eligibility ◆ ID cards ◆ Evidence of Coverage (EOC) booklets | Gettysburg Health Administrators, Inc. (800) 497-4474 toll free | Delta Dental (800) 422-4234 www.deltadentalins.com |
| <ul style="list-style-type: none"> ◆ Enrollment forms ◆ Add/delete enrollees* | Gettysburg Health Administrators, Inc. 404 Baltimore Street PO Box 1060 Gettysburg, PA 17325-1060 toll free (800) 497-4474 fax (717) 334-5851 | Gettysburg Health Administrators, Inc. 404 Baltimore Street PO Box 1060 Gettysburg, PA 17325-1060 toll free (800) 497-4474 fax (717) 334-5851 |
| <ul style="list-style-type: none"> ◆ Group Billing & Payments** | GettHealth Premium Account 404 Baltimore Street PO Box 1060 Gettysburg, PA 17325 toll free (800) 497-4474 | GettHealth Premium Account 404 Baltimore Street PO Box 1060 Gettysburg, PA 17325 toll free (800) 497-4474 |
| <ul style="list-style-type: none"> ◆ Dentist directories | visit www.deltadentalins.com or call (800) 932-0783 | Delta Dental (800) 422-4234 or www.deltadentalins.com |

***Adding/deleting enrollees:**

- ◆ Enrollment/Change forms are required to add employees and/or dependents. All eligible employees/dependents must enroll at the time they are eligible or they may enroll at the employers’ next open enrollment period. Exceptions are made for qualifying events.
- ◆ Deleting employees or dependents can be done on the group billing statements by crossing out the enrollee’s name and indicating a termination effective date, or by completing and submitting an Enrollment/Change form.
- ◆ Deadline for adding new employees or adding dependents is as follows:

| Program | Must be received at GettHealth by the . . . | To show a first of the month effective date by the . . . |
|-----------------------------------------------------|------------------------------------------------|-------------------------------------------------------------|
| Delta Dental PPO plus Premier & Delta Dental PPO | 20th of the current month | 1st of the following month |
| DeltaCare USA | 15th of the current month | 1st of the following month |

****Group billing and payments:**

- ✓ Please make checks payable to GettHealth Premium Account and send to Gettysburg Health Administrators, Inc., 404 Baltimore Street, PO Box 1060, Gettysburg, PA 17325.
- ✓ Statements are issued on the 1st of each month (for the next month’s coverage) and premium must be received by the 20th of the month.
- ✓ Your prompt remittance of premium will allow for accurate and timely eligibility reporting.
- ✓ If your group’s premium is not received by the due date, your account will be considered delinquent and eligibility for your enrollees will be interrupted.