

Delta Dental's Small Business Program

For groups with 2-99 enrolled employees
Nevada

Plan Year 2026

Summary of PPO Plans and Benefits: (No waiting period for any procedure)						
Plan	Deluxe 200		Advantage 300		Core 201	
Benefits	PPO ¹		PPO ¹		PPO ¹	
	PPO Dentists	Non-PPO Dentists	PPO Dentists	Non-PPO Dentists	PPO Dentists	Non-PPO Dentists
Diagnostic & Preventive (D&P)	100%	100%	100%	80%	100%	100%
Basic (fillings, oral surgery, root canals perio and sealants)	90%	80%	80%	60%	80%	80%
Crowns, cast restorations and prosthodontics	60%	50%	50%	50%	0%	0%
Calendar Year Deductible - waived for D&P	\$50 per enrollee/ \$150 per family		\$50 per enrollee/ \$150 per family		\$50 per enrollee/ \$150 per family	
Calendar Year Maximum (per enrollee)	\$1,500		\$1,500		\$750	
Orthodontics (optional)	None		None		None	
Orthodontics Lifetime Maximum (per enrollee)	N/A		N/A		N/A	
Groups sized 2 to 4 eligible employees- Employer contributions of 50% to 74.9%						
Industry	Level 1	Level 2	Level 1	Level 2	Level 1	Level 2
Region 1						
One Party	\$46.93	\$54.92	\$39.64	\$46.40	\$21.83	\$25.54
Two Party	\$102.39	\$119.82	\$86.49	\$101.22	\$47.64	\$55.73
Three Party+	\$132.39	\$154.89	\$111.83	\$130.84	\$61.57	\$72.05
Groups sized 2 to 4 eligible employees- Employer contribution of 75% to 100%						
Industry	Level 1	Level 2	Level 1	Level 2	Level 1	Level 2
Region 1						
One Party	\$43.95	\$51.40	\$37.12	\$43.42	\$20.69	\$24.21
Two Party	\$95.85	\$112.15	\$80.97	\$94.74	\$45.11	\$52.81
Three Party+	\$123.92	\$144.99	\$104.68	\$122.48	\$58.34	\$68.24
Contact our sales team for quotes on optional features including additional Annual Maximums, Orthodontics, and D&P Maximum waiver.						

¹ Reimbursement for all dentists will be based on the PPO contracted fee.

² Oral surgery, Periodontics, and Endodontics are not covered

This information is intended for use in conjunction with the Delta Dental Small Business Program marketing brochure. Please refer to the brochure for plan design information, summary of limitations and exclusions, and underwriting guidelines.

Additional Information

Waiting period: Contribution of 0 – 49% - 12 month waiting period applies to endodontics, periodontics, oral surgery, major, and orthodontics services (if covered). May be waived for all initial enrollees and their dependents when this employer previously provided comprehensive dental coverage and there was no break in coverage. New hires and their dependents are subject to the waiting period.

Rate guarantee: 24 months for groups enrolling on or before December 1, 2026.

Broker commission: These rates include 10% flat broker commission and any applicable miscellaneous broker compensation.

