



Delta Dental Medicare Advantage Network FAQ

This FAQ is intended to answer high-level questions about the new Delta Dental of Virginia Medicare Advantage network. For additional questions, reach out to your Network Development Specialist or email ProviderRelations@deltadentalva.com.

1. Why is Delta Dental of Virginia creating a Medicare Advantage network?

We believe everyone deserves a healthy smile. Traditional Medicare plans don't include dental benefits, so we're giving those 65 and older the option to join Medicare Advantage, a supplemental dental plan.

2. What is changing?

As a Delta Dental Medicare Advantage network dentist, your fees will not change by participating in this new network. You will be reimbursed at your current Delta Dental network participation fee schedule.

3. What is the difference between Medicare and Medicaid?

Medicare is insurance primarily for anyone age 65 and older. Medicaid gives health coverage to those with limited income and resources. Being a part of our Medicare Advantage Network will not enroll you as a Medicaid provider.

4. How will claim filing and payment be different from my commercial Delta Dental patients?

The claims filing process and payment timeline will be similar for Medicare Advantage patients as they are today for your current commercial patients. As noted in #2, you will be reimbursed at your current Delta Dental network participation fee schedule.

5. What is covered under the Medicare Advantage dental plans?

Plan information will be available soon!

For questions, reach out to your Network Development Specialist, or email ProviderRelations@deltadentalva.com.