



# Dental Benefits

Administered by Delta Dental · Plan Year October 1, 2025 – September 30, 2026

SynaTek offers dental coverage through **Delta Dental**. The plan covers preventive, basic, and major services for you and your eligible dependents. Use in-network Delta Dental providers to receive the highest level of benefits.

PREVENTIVE CARE  
**100%**

Exams, X-rays & Cleanings covered in full

ANNUAL MAXIMUM  
**\$2,000**

Per covered person, per plan year

ORTHO LIFETIME MAX  
**\$1,000**

For eligible children (orthodontics)

IN-NETWORK COVERAGE	DELTA DENTAL PLAN
<b>DEDUCTIBLE</b>	
Annual Deductible (Non-Preventive Services)	\$50 Individual / \$150 Family
<b>PREVENTIVE SERVICES</b>	
Oral Exams, Cleanings, X-rays <small>No deductible applies to preventive services</small>	100% Covered
<b>BASIC SERVICES</b>	
Fillings, Root Canals, Gum Treatments, Oral Surgery <small>After deductible</small>	Plan pays 80%
<b>MAJOR SERVICES</b>	
Crowns, Implants, Inlays, Bridges, Dentures <small>After deductible</small>	Plan pays 50%
<b>ORTHODONTIA &amp; PLAN MAXIMUM</b>	
Orthodontia (Children) <small>Lifetime maximum per covered child</small>	50% – up to \$1,000 lifetime
Annual Maximum Benefit	\$2,000 per person

## Per-Paycheck Deductions (26 Pay Periods)

Coverage Tier	Dental
Employee Only	\$3.30
Employee + Spouse	\$16.60
Employee + Child(ren)	\$16.60
Employee + Family	\$16.60

DELTA DENTAL  
 1-800-932-0783

WEBSITE  
[www1.deltadentalins.com](http://www1.deltadentalins.com)