

# Member Information Available 24/7!

Delta Dental of New Mexico offers member information 24/7 through our website and Interactive Voice Response System (IVR).

## Website

To access information online, visit our website at [www.deltadentalnm.com](http://www.deltadentalnm.com) and use the “Members” link at the top of the page.

### Members Section

Go to Subscriber Materials and sign in with your group number (8523) to view and print coverage documents:

- Summary of Dental Plan Benefits
- Dental Benefit Handbook
- Provider Directory

### Consumer Toolkit

Select the Consumer Toolkit link and sign in to:

- Verify eligibility of subscriber and dependents
- Confirm status of deductibles and plan maximums
- Review how a specific claim was processed
- Print a personalized subscriber ID card



### Wellness Links

In the Wellness section, take advantage of:

- Oral health topics, flyers, and teaching tools
- Kid Corner (games, puzzles, and other fun activities)

## Interactive Voice Response (IVR)

Delta Dental’s Customer Service Representatives are available M-F, 8:00am-4:30pm MT.

Delta Dental’s automated IVR phone system can be used during non-business hours or when you don’t need to talk to a representative.

- Direct: (505) 855-7111
- Toll-Free: (877) 395-9420

### IVR Features

- Verify eligibility, including effective date of coverage
- View breakdown of benefits by category (endodontics, preventive, etc.)
- View time limitations and eligibility for specific benefits (exams, cleanings, fluoride, and radiographic images)
- Check maximums and deductibles, including the amount met to date and services that apply
- Check status of pre-treatment estimates and paid claims
- Request ID cards by fax
- Request copies of benefits and eligibility, explanation of benefits and pre-treatment estimates
- Request a list of participating dentists via voice, fax, or email
- Verify mailing address information
- See coordination-of-benefit allowances



Are you planning a major dental service?



Would you like to know what your out-of-pocket expenses will be prior to receiving treatment? Ask your dentist to submit a pre-treatment estimate. A pre-treatment estimate will verify if the services are covered under your plan, determine if you have satisfied your deductible, and show how much of your annual plan maximum has been utilized. A copy of the pre-treatment estimate will be sent to you and your dentist, so before you have the work done, you will know what your out-of-pocket expenses will be.