



Healthy Mouth, Healthy Body Group Enrollment Form

As a result of the growing evidence connecting oral healthy to overall health, Delta Dental of Kentucky offers Healthy Mouth, Healthy Body as a part of your dental benefits package. Members with the following conditions are eligible for two additional cleaning or periodontal maintenance procedures:

- Diabetes with periodontal disease
- Pregnant women with periodontal disease
- Individuals with renal failure/dialysis
- Individuals with suppressed immune systems
- Head and neck radiation patients (these individuals are also eligible for two topical fluoride treatments)
- Individuals at risk for ineffective endocarditis

It's simple for you to begin offering this new benefit to your employees. Just complete this form and send it to us.

By mail:

Delta Dental of Kentucky
Attn: Group Support Specialist
PO Box 242810
Louisville, KY 40224

By email:

marketing@deltadentalky.com

By fax:

(502) 736-4827

Group Name: _____

Delta Dental Group Number: _____

Group Administrator Name: _____

Signature: _____ Date: _____

Please keep a copy of this form. This form will become an addendum to your Group Contract.

The following materials are available to you to help communicate this new benefit to your employees:

- Member Educational Brochures
- Member Enrollment Plans

You can request these materials by completing the following information.

Please email the PDF files of these materials

Email Address: _____

Please mail quantity of printed materials.

Street Address: _____

City, State, Zip: _____