

Empowering Consumers to Focus on Oral Health

Example of LifeSmile program resources on the member portal and the oral health risk assessment:

LifeSmile™

Your Dental Health & Wellness Program

View by member:

Jane Smith

Your Dental Cleanings

Year	Cleanings
2021	2
2020	1
2019	2
2018	2
2017	1

Regular visits to the dentist are fundamental to making your smile last and preventing tooth decay and gum disease.

Life gets busy, don't let that stop you from keeping up on your oral health.

Your dental plan covers:

An Unlimited Amount Of Cleaning(s) Covered At 100% from an In-network Dentist

Your dental plan includes the Right Start 4 Kids™ (RS4K) program. With RS4K, kids 12 and under receive coverage at 100% for all services covered under the plan. An in-network dentist must be seen or the plan's underlying contract applies. Learn more about the RS4K program by reviewing your benefits here.

Check Your LifeSmile® Score

Take a few minutes to answer questions about your oral health and lifestyle habits. You will receive a score that tells you what your risk for tooth decay, gum disease and oral cancer are. You can print these results and discuss with your dentist.

[Check My Score](#)

Knowledge Center

Learn more about your oral health, your dental benefits, available member tools and more with Delta Dental's Knowledge Center.

[View the Knowledge Center](#)

Summary

The following is a report summary

What does the Risk Score mean?

Your *Risk Score* describes the chance your health will get worse **without** good home and professional care.

What does the Disease Score mean?

Your *Disease Score* describes how much care is needed to get you as healthy as you can be or to prevent another episode of disease.

Gum Disease Risk: 1

Your estimated gum disease risk is 1, indicating very low risk.

1

2

3

4

5

[Learn More](#)

Gum Disease Score: 1

Your estimated gum disease severity is 1, indicating healthy gums.

1

2

3

4

5

[Learn More](#)

Tooth Decay Risk: 1

Your estimated tooth decay risk is 1, indicating very low risk.

1

2

3

4

5

[Learn More](#)

Tooth Needs: 1

Your estimated tooth needs is 1, indicating very low need for fillings or replacement of missing teeth.

1

2

3

4

5

[Learn More](#)

Oral Cancer Risk: 1

Your estimated Oral Cancer risk is 1, indicating very low risk.

1

2

3

4

5

[Learn More](#)