

Dental Insurance Open Enrollment

Oct. 30 through Nov. 19, 2025



Dental premiums,
plan changes,
contacts and more

**Retirees and Former Employees
with Disabilities (FEWD)**

Visit mn.gov/segip-oe for more information

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Dental Insurance Open Enrollment: Oct. 30 through Nov. 19, 2025

It's Open Enrollment time for dental insurance.

This information is for retirees and former employees with disabilities (FEWD) in the State Employee Group Insurance Program (SEGIP) dental plan.

From Oct. 30 through Nov. 19, you can make some changes to your dental insurance. Your coverage starts Jan. 1 and ends Dec. 31, 2026.

If you are a retiree, you can:

- Keep the coverage you have today
- Switch between HealthPartners Dental and Delta Dental Group 216
- Drop your spouse, child, or others who are no longer eligible

If you are a former employee with disabilities, you can:

- Keep the coverage you have today
- Switch between HealthPartners Dental and Delta Dental Group 216
- Add your spouse, children or other dependents who are eligible
- Drop your spouse, child, or others who no longer eligible

This Book Tells You

- How much you will pay for coverage in 2026 (page 5)
- Dates, times and locations of in person and online meetings for retirees (page 3)
- What's new for 2026 (page 5)
- What the plan covers (page 11)
- How to switch between Delta Dental Group 216 and HealthPartners Dental if you'd like (page 4)

After Open Enrollment, call the number on the back of your dental insurance ID card or go to **SEGIP's website** if you have questions.

SEGIP Member Services

Call 651-355-0100 or 800-664-3597

- 7 a.m. to 4 p.m., weekdays
- 7 a.m. to 7 p.m., Nov. 19
- Closed Nov. 11, for Veterans Day
- Telecommunications Relay: Use the service you prefer.

Email: segip.mmb@state.mn.us

You Need to Know

- Do nothing if you want to keep the dental coverage you have today.
- Your changes start on Jan. 1, 2026.
- If you drop the state's dental plan, you cannot get it back later.
- This book gives you basic facts about SEGIP's dental coverage. Delta Dental or HealthPartners Dental may still need to approve some services, even ones listed at 80%.
- Follow the Summary of Benefits if this book says something different. The Summary is the official guide. You can find the documents on the SEGIP page of HealthPartners or Delta Dental websites.
- The dental plan is part of the State Employee Group Insurance Program at Minnesota Management and Budget. The State expects SEGIP to continue for the future. However, it may change or end parts of the program if needed. SEGIP will make changes only as allowed by law and union agreements.
- SEGIP will post links to 2026 plan documents on its website in January.
- Need this in another format? Contact SEGIP Member Services at 651-355-0100, 800-664-3597, or segip.mmb@state.mn.us.



Meetings for Retirees Only

**The Nov. 5 meeting is online.
All other meetings are
in person only.**

- You do not need to preregister.
- SEGIP staff and plan representatives will be there. In the first hour, they will give a presentation. In the second hour, you can talk with the representatives directly.
- To request an accommodation, such as an ASL interpreter or real-time captioning (CART), contact SEGIP Member Services at 651-355-0100, 800-664-3597 or segip.mmb@state.mn.us two weeks before the meeting.

Date	Time	Location
Monday, Oct. 20	10 a.m. to noon	St. Paul, Radisson Hotel, Capitol Ridge Building 161 St. Anthony Ave., St. Paul, MN 55103
Tuesday, Oct. 21	10:30 a.m. to 12:30 p.m.	Duluth - MnDOT 1123 Mesaba Ave., Duluth, MN 55811
Wednesday, Oct. 22	10 a.m. to noon	Eagan Community Center 1501 Central Parkway, Eagan, MN 55121
Thursday, Oct. 23	10 a.m. to noon	Rochester - MnDOT 2900 48th St. N.W., Rochester, MN 55901
Friday, Oct. 24	10 a.m. to noon	Mankato - MnDOT 2151 Bassett Drive, Mankato, MN 56001
Monday, Oct. 27	10 a.m. to noon	Eagan Community Center 1501 Central Parkway, Eagan, MN 55121
Tuesday, Oct. 28	1 to 3 p.m.	Minnesota Pollution Control Agency 520 Lafayette Road, St. Paul, MN 55155
Thursday, Oct. 30	10:30 a.m. to 12:30 p.m.	Baxter/Brainerd -- MnDOT 7694 Industrial Park Road, Baxter, MN 56425
Friday, Oct. 31	10 a.m. to noon	MnDOT - St. Cloud 3725 12th St. N., St. Cloud, MN 56303
Monday, Nov. 3	10 a.m. to noon	St. Paul DOC 1450 Energy Park Drive, St. Paul, MN 55108
Wednesday, Nov. 5	10 a.m. to noon	Live online. Go to mn.gov/segip-oe and select the meeting link.

Take These Four Steps

1 Understand what changes

- Review the highlights starting on page 5.
- Join an in-person or online meeting. See page 3 for the schedule and locations.
- Call Delta Dental or HealthPartners to check if your dentist is in their network for 2026. The number is on the back of your dental insurance ID card. It's also on page 12.
- Look at the plan highlights on page 11. Call Delta Dental or HealthPartners Dental if you have questions.

2 Find out how much you will pay for insurance each month in 2026

- Dental insurance premiums will go up 5%. Your cost will be \$48.34 for single coverage and \$143.06 for a family.
- Pay the full premium on the bill you get each month from Delta Dental or HealthPartners Dental.

3 Make your decision

- Do you want to keep your current plan administrator?
- Do you want to switch between Delta Dental and HealthPartners?
- You and your family must all be with the same dental administrator—either Delta Dental or HealthPartners Dental.
- If you cancel your SEGIP dental insurance, you and your family can't sign up again later.

4 Act

- If you send a payment through your bank, change the amount for your automatic payment.
- If you have MSRS deposit money from your Health Care Savings Plan into your account for dental premiums, call MSRS and tell them the new amount.

If you want to keep your current coverage:

- You don't need to fill out any forms.
- You will keep the dental administrator you have today.

If you want to drop someone from your coverage:

- Complete the form on page 18. Send it to your current dental administrator.
- Forms must be postmarked by 11:59 p.m., Nov. 19, 2025.

If You Want to Change Plan Administrators:

- To sign up for Delta Dental Group 216 or HealthPartners Dental follow the steps on page 16.
- To leave your current dental administrator, follow the steps on page 18.
- Forms must be postmarked by 11:59 p.m., Nov. 19, 2025.



New for 2026

Changes to Orthodontia, Networks, and More

Starting Jan. 1, 2026 your dental plan will pay more for braces, retainers, and other orthodontic care.

- The plan pays up to \$3,200 per person for orthodontic care. It's the new lifetime maximum.
- Your lifetime maximum stays the same even if you switch between Delta Dental Group 216 and HealthPartners Dental.

National Dental Network

You now have access to a national dental network through Delta Dental or HealthPartners. This gives you more choices if you see a dentist outside Minnesota who is not in the State Dental Plan network.

When you use a dentist in the Delta or HealthPartners national network, you pay:

- Exams, x-rays, and preventive care: \$0
- Fillings, gum treatment, dentures, implants, and similar services: 40% of the cost
- Single coverage deductible: \$100
- Family coverage deductible: \$300

Call the customer service number on the back of your dental ID card if you have questions about the national network.

See the Dental Schedule of Benefits on page 11 for highlights. You'll find the rules and details in the 2026 Dental Summary of Benefits online in January.

Premiums

What you pay each month in 2026 increases 5%.

	Single	Family
2026 Premiums	\$48.34	\$143.06

Other News

- Eligibility. The state updated its rules for former spouses, grandchildren, and foster children. You can find this updated language on [SEGIS's website](#) and in the 2026 Summary of Benefits.



Who Can Get Dental Insurance?

- Retirees who kept their SEGIP dental insurance when they retired may continue their coverage. A spouse, child, or other eligible dependent covered by the plan at that time could be covered as well. Outside Open Enrollment, a retiree may make specific changes if they experience a qualifying life event.
- Former employees with disabilities who already have SEGIP dental insurance may cover their spouse, children, or other dependents who are eligible during Open Enrollment. Outside Open Enrollment, former employees with disabilities may make specific changes if they experience a qualifying life event.

Take note! If you add a spouse, child, or other dependent to your coverage, you must send documents to prove they qualify. After Open Enrollment, SEGIP will send you a letter. The letter lists the deadlines and documents you must send. Go to [SEGIP's Family Eligibility webpage](#) to see who is eligible.



Who are the Dental Plan Administrators?

Two companies offer the SEGIP's State Dental Plan:

- Delta Dental Group 216
- HealthPartners Dental

They offer similar benefits, but some parts work differently depending on which plan you choose.

Is Your Dentist Covered?

- Call Delta Dental or HealthPartners Dental to ask about the 2026 networks.
- You pay the least when you use a dentist or provider who is in the State Dental Plan network.
- If you see a dentist who is not in your plan's network, you'll pay more, or the care may not be covered at all.

Where Can You Use Your Dental Insurance?

Delta Dental Group 216 and HealthPartners Dental:

- Serve all counties in Minnesota
- The State Dental Plan network does include providers in some counties that border the state.
- Go to the Schedule of Benefits on page 11 to review how coverage works using your administrator's national network, or when you go out of network.

How Much Will You Pay Each Month?

- Your cost is the same whether you choose Delta Dental Group 216 or HealthPartners Dental.
- Your cost depends on if you cover just yourself or yourself and family.

Coverage Type	Monthly Premium
Retiree/ Former Employee Only	\$48.34
Family/includes dependents up to age 26	\$143.06
Surviving Spouse Only	\$48.34
Surviving spouse with dependents up to age 26	\$143.06

Get a Cost Estimate Before Treatment

If you need dental work that isn't just a checkup or cleaning, ask your dentist for a cost estimate from HealthPartners Dental or Delta Dental first.

This tells you:

- How much the plan will pay
- How much you will pay

HealthPartners Dental calls this process a Predetermination.

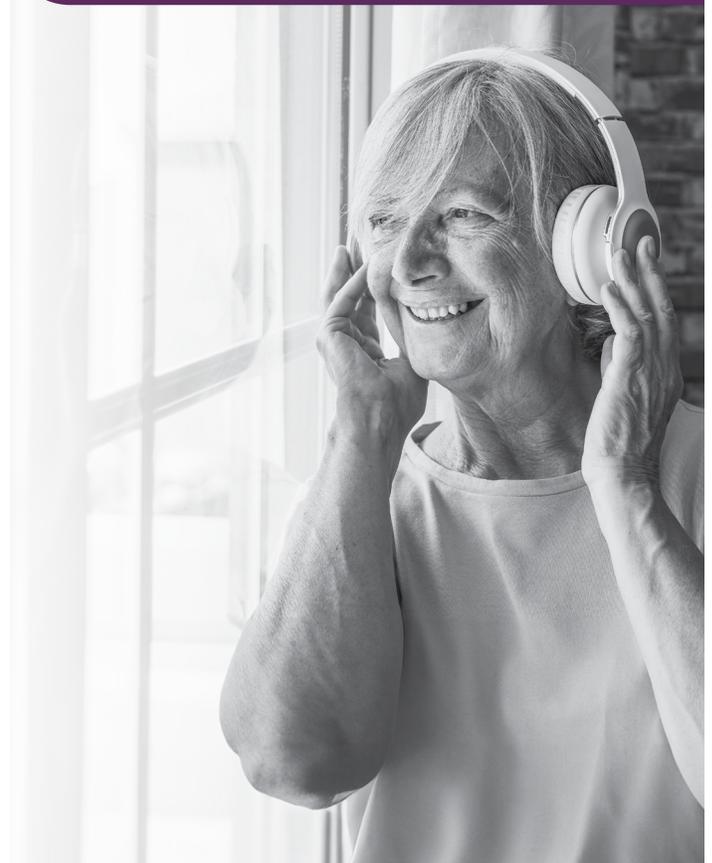
Delta Dental calls this process a Pretreatment Estimate of Benefits.

What Does SEGIP's Dental Plan Cover?

The dental plan helps pay for many kinds of dental care. This includes:

- Regular checkups
- Cleanings
- X-rays
- Fillings
- Crowns
- Root canals
- Pulling teeth
- Braces for children and adults
- Dental implants
- And more

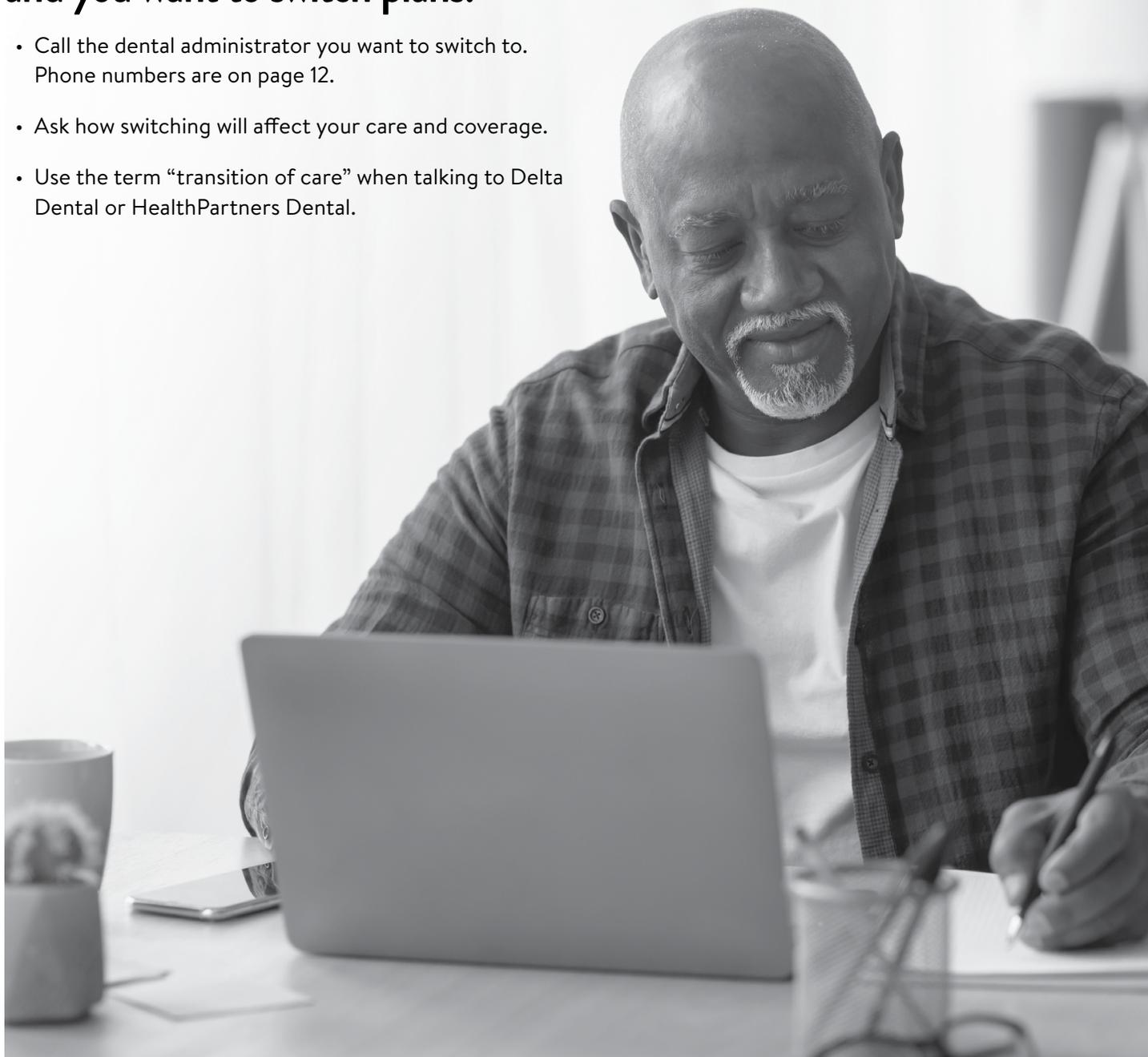
Look at the Delta Dental Group 216 or HealthPartners Dental Summary of Benefits on plan administrator's website. The document tells you how often services are covered. It also explains any limits on those services.



If You Are Thinking About Switching Plans

If you or a family member are getting dental treatment now that will continue into 2026 (especially braces, implants, or other treatments that take a long time) and you want to switch plans:

- Call the dental administrator you want to switch to. Phone numbers are on page 12.
- Ask how switching will affect your care and coverage.
- Use the term “transition of care” when talking to Delta Dental or HealthPartners Dental.



Coverage in Special Circumstances

Family Coverage/Life Events

Retirees:

If you chose coverage for yourself but not family members when you retired, there are two scenarios where you may add dependents.

You have 30 days to act if your spouse or other dependent loses coverage through their employer or other employer group, or you are newly married.

Former Employees with Disabilities:

You may add family coverage outside Open Enrollment if you:

- Are newly married
- birth of a child or adoption
- Your spouse or other dependent loses coverage through their employer or other employer group.

You have 30 days to act. The date of the event counts as day 1. If you qualify to make a change:

Submit a Qualifying Status Change form to SEGIP. You'll find it in the **Find a Form section of the website.** Requirements also include:

- Providing proof of the event.
- If your dependent lost coverage, you need a document on company letterhead. The document must state the coverage your dependent had and the date it ended. Be sure it includes the date of the event that is causing the loss of coverage

The 30 days starts on the day of the event. The request to change your insurance must match the life event. If the requested change causes your premium to increase or decrease, you will be notified of the new premium and the date it's due.

Surviving Spouse

A spouse, and dependents under age 26 who are covered by Delta Dental Group 216 or HealthPartners Dental when the retiree dies may continue to participate in SEGIP.

Divorce after Retirement

If you divorce after retirement, contact SEGIP within 30 days from the date of the divorce. Ask about how to continue coverage.

When the Child You Cover Turns 26

If you cover a child who is nearing age 26, contact SEGIP before their 26th birthday. Find out if your child or other dependent may continue their coverage through COBRA.



Contact SEGIP prior to an event such as a marriage if you're adding coverage for a spouse who is age 65 or older.



2026 Dental Schedule of Benefits

Annual Maximum per person \$2,200 (does not apply to Preventive Care, Diagnostic Care, or Orthodontia).

Orthodontics Lifetime Maximum per person \$3,200 (does not start over if you change dental administrators).

	State Dental Plan Network	National Network	Out-of-network
Annual Deductible	\$50 per person \$150 per family	\$100 per person \$300 per family	\$125 per person

Diagnostic and preventive care (deductible does not apply)

Covered Services	State Dental Plan Network	National Network	Out-of-network
Examinations, dental cleanings, and routine x-rays	100% coverage	100% coverage	50% coverage
Fluoride treatment (to age 19)	100% coverage	100% coverage	50% coverage
Space maintainers	100% coverage	100% coverage	50% coverage
Sealants	100% coverage	100% coverage	50% coverage

Restorative care and prosthetics (deductible applies)

Covered Services	State Dental Plan Network	National Network	Out-of-network
Fillings (customary restorative materials)	80% coverage	60% coverage	50% coverage
Oral surgery	80% coverage	60% coverage	50% coverage
Periodontics (gum disease therapy)	80% coverage	60% coverage	50% coverage
Endodontics (root canal therapy)	80% coverage	60% coverage	50% coverage
Inlays and onlays	80% coverage	60% coverage	50% coverage
Restorative crowns	80% coverage	60% coverage	50% coverage
Dental implants	80% coverage	60% coverage	50% coverage
Fixed or removable bridgework	80% coverage	60% coverage	50% coverage
Full or partial dentures	80% coverage	60% coverage	50% coverage
Dental relines or rebases	80% coverage	60% coverage	50% coverage
Orthodontics (deductible does not apply)	80% coverage	60% coverage	50% coverage

*Out-of-network percentage is of the allowed amount. You are responsible for the difference between the allowed amount and what is charged.

Emergency services are covered at the same benefit level as non-emergency services, whether care is received in the State Dental Plan network, the National Network, or Out-of-network.

See Summary of Benefits for specific plan limitations.

Dental Plan Contact Information

Administrator	Phone and Address	Website
HealthPartners Dental	952-883-7900 888-343-4404 MS21103R P.O. Box 9463 Minneapolis, MN 55440-9463	healthpartners.com/segip
Delta Dental Group 216 Delta Dental of Minnesota	Eligibility and Claims questions: 651-406-5916 or 800-553-9536 Premium Billing and Payment questions: 651-406-5909 or 800-926-5530 Mail Stop #216 500 Washington Ave. S., Suite 2060 Minneapolis, MN 55415	deltadentalmn.org/segip
State Employee Group Insurance Program (SEGIP)	651-355-0100 1-800-664-3597 segip.mmb@state.mn.us Minnesota Management and Budget 400 Centennial Office Building 658 Cedar St. St. Paul, MN 55155	mn.gov/mmb/segip

Glossary

Deductible: The amount you must pay before your plan helps with costs. It starts over every year. The dental plan has three categories. The lowest deductible is for care you get from local providers who are in your plan administrator's State Dental Plan network. Care you get from a provider in the Delta Dental or HealthPartners national network has a separate deductible. The deductible is the highest when you get care from providers who are out-of-network.

Dependent: This usually means your spouse or children. You will need to send in proof, like copies of a marriage certificate, to show they are your family.

Effective date: The day your insurance starts. You can get care starting on this day. The coverage you're buying is effective Jan. 1 through Dec. 31, 2026. Pay your premium by the deadline each month.

Family Coverage: Dental insurance for you and your family. Family coverage is for more than one person.

In-Network: Dentists your plan works with. Ask before getting care to make sure your dentist is still in the network. If you get care from someone who is not your network, your cost for the care will be higher. Or the care may not be covered at all.

Open Enrollment: A specific time each year when you can make certain changes to your dental coverage.

Provider: Dentist or dental worker who gives you care. If they work with your plan, they are a State Dental Plan or National Network. They may also be called a participating provider.

Qualifying Life Event: Certain events in life qualify you to make specific changes to insurance outside open enrollment. For example, if you get married you have 30 days to add your spouse to your dental coverage.

Summary of Benefits: The paperwork tells you what your plan covers. You can find it on SEGIP's website, mn.gov/mmb/segip. Go to the Retiree or FEWD tab and select Dental.

Notice of Intent to Collect Private Data

Minnesota Management and Budget (MMB) administers the State Employee Group Insurance Program (SEGIP). As an individual seeking to or participating in a group insurance program, you are asked to provide certain data for the purpose of the administration of group insurance benefits. This notice explains why MMB is requesting private data, how the data will be used, who has access to the data, and what may happen if you do not provide the requested data.

Use of Data. The data requested by MMB may be used for the following purposes:

- To determine eligibility for group insurance benefits
- To administer group insurance benefits
- As required by State and federal law, rule, or regulation

Right of Refusal.

You are not required to provide any of the requested data, however, if you do not provide the requested data, group insurance program benefits may be denied or delayed for you, your spouse, or your dependent(s), as applicable.

Access to Data. The data that you provide may be shared with:

- Authorized personnel whose jobs reasonably require access
- Insurance and service providers, and other contracted vendors
- Any other person or entity authorized by federal or state law to access the data, including but not limited to the Office of the Legislative Auditor, the Minnesota Department of Health, the Minnesota Department of Commerce, or others as authorized by a court order

The parents of a minor may access private data about the minor unless there is a law, court order, or other legally binding instrument that blocks the parent from accessing the data.