



<Print Date>

<Case Number>

Hawki Members Have a New Dental Plan Option

This letter tells you about your children's dental coverage starting July 1, 2026. You have a new Hawki Dental Plan option and the Annual Choice Period for the dental plan is happening at the same time. This letter informs you of your Hawki dental plan options **effective July 1, 2026**.

The back of this letter shows the dental plan your children have been assigned. Please note, the Hawki dental plan may be different from the one they have now.

From now until **<<Choice Period End Date>>** you can change your children's dental plan.

If you want to keep things as listed on the back of this letter, you do not have to do anything.

To change to a different dental plan, follow the steps below.

Step 1

Review

- Review the enclosed information about your children's dental plan choices to make the best choice for their dental care needs.

Step 2

Choose

- For each child listed on the **back** of this letter, choose the dental plan that best fits their needs. Each child may choose a different dental plan.
- You can choose from these dental plans:
 - Delta Dental of Iowa
 - DentaQuest
- You have until **<<Choice Period End Date>>** to change their assigned plan for any reason.

Step 3

Enroll (Choose One)

- **Phone:** Call Hawki Member Services at **1-800-257-8563** or locally in the Des Moines area at **515-256-4606**.
- **Mail:** Return the completed plan change form (enclosed) to:
Member Services
PO Box 36510
Des Moines, IA 50315
- **Email:** Plan change form can be sent to hawki@hhs.iowa.gov

Turn this letter over to see your children's assigned dental plan enrollment.

Your children's assigned enrollment for a dental plan is listed below. **If you want to keep things just the way they are, you do not have to do anything.** If you want to make a change to their dental plan enrollment, please follow the steps on the front of this letter.

State ID Number	Member Name	Dental Plan	Dental Plan Phone
<0000000X>	<MEMBER NAME>	<DC>	<###-###-####>
<0000000X>	<MEMBER NAME>	<DC>	<###-###-####>
<0000000X>	<MEMBER NAME>	<DC>	<###-###-####>
<0000000X>	<MEMBER NAME>	<DC>	<###-###-####>
<0000000X>	<MEMBER NAME>	<DC>	<###-###-####>
<0000000X>	<MEMBER NAME>	<DC>	<###-###-####>
<0000000X>	<MEMBER NAME>	<DC>	<###-###-####>
<0000000X>	<MEMBER NAME>	<DC>	<###-###-####>

Dental Plan Selection Information

- After July 1, 2026, you will have 90 days to change your children's dental plan for any reason.

If you need help picking a plan, call Hawki Member Services for choice counseling. For general questions and additional information, contact Hawki Member Services at:

- Phone: **1-800-257-8563** or locally in the Des Moines area at **515-256-4606**, Monday through Friday, from 8 a.m. to 5 p.m.
- Email: Hawki@hhs.iowa.gov

Para solicitar este documento en español, comuníquese con Servicios para Miembros al teléfono **1-800-338-8366** de 8 a.m. a 5 p.m., de Lunes a Viernes.

For telephone accessibility assistance if you are deaf, hard-of-hearing, deaf-blind or have difficulty speaking, call Relay Iowa TTY at 1-800-735-2942.

If your child has a Hawki premium, you have the option to pay the premium online using the web application ClickPay, administered through US Bank. Find more information at hhs.iowa.gov/hawki

- You can make a one-time or recurring monthly withdrawal from your bank account to pay this premium.
- You are limited to 12 recurring payments. It is your responsibility to setup recurring payments again after 12 months or stop your recurring payment when your premium obligation or enrollment in the Hawki program ends. Your bank will continue to make payments until you stop them.