

## **UPDATED DENTAL PLAN INFO**

**Members now get even more discounts on care.**

We wanted to share some great news about a change to your Delta Dental of Massachusetts dental coverage that has the potential to save your employees money. This change gives your members even more opportunities to take advantage of our great Delta Dental discounts.

**This enhancement will go into effect on Nov. 1, 2016.**

As an important and valuable partner, we wanted to give you an advance look so you can plan for employee communications.

**How will this enhancement work?**

Our providers will be required to give members the same negotiated discounts on services that are a standard part of their plan, even if those services are not covered due to certain circumstances, which may include the following:

The member exceeds their visit limits for a service like cleanings or X-rays.

**The member exceeds their annual benefit maximum**

**The member is over the age limit for a service such as fluoride varnish. This does not apply to orthodontia care.**

**The member receives a service that is covered by an alternative benefit, such as posterior tooth white fillings.**

**The member is still in their waiting period.**

**The member exceeds their lifetime maximum for a service.**

**Please note that this list is for illustrative purposes only, and that the circumstances in which this benefit enhancement applies will vary by state. Your members' plan will be set up to reflect the enhancement that applies based upon the state in which you receive treatment.**

**This enhancement applies only to services that are included among the core benefits coverage of the member's plan. It does not apply to services that their plan does not already cover, such as cosmetic care or tooth whitening. Additionally, there are certain situations that are excluded from this enhancement, which include, but are not limited to:**

**General anesthesia and IV Sedation that is not in conjunction with the surgical removal of impacted teeth**

**Implants that are not received in lieu of a three-unit bridge. The exception to this is for plans that include a benefit rider for implant coverage.**

**Orthodontia -This includes Invisalign, medically necessary orthodontia, and age-based restrictions for standard orthodontia care.**

**This enhancement does not change what is covered under the member's plan or what the plan pays. It just lowers the out-of-pocket costs for members when they receive care covered under their plan. Savings should be reflected on both EOBs as well as the claim section of our member portal.**

**Because your plan is fully-insured, discounts will be subject to applicable state laws where the members receive care. We are configuring our internal systems to apply the enhancement based on that specific state's laws. You can visit our member website to see how this enhancement will be applied in each state.**

## **Next Steps**

**You can download a copy of the member fact sheet that is suitable for sharing with your employees at our website. It is our expectation that our clients will communicate this change directly to your employees/members.**

## **FAQs**

### **Will this impact claims costs?**

**No. This change will not change the claims costs you pay. Any remaining out-of-pocket costs will be paid by the member, not by the dental plan.**

### **So what do members need to do?**

**Your employees don't need to do anything different. They just go to their usual dentist and receive care. Their dentist should automatically give them their negotiated discounted rate on services that are covered by your plan. Keep in mind that the member must be receiving care that is included in their base plan to take advantage of their discount.**

**Will members who already received care be able to take advantage of the discount?**

**This change will go into effect as of Nov. 1, 2016, and should apply to all services received on or after that**

**date. We will not be reprocessing any claims or applying the discount retroactively.**

### **What types of situations does this apply to?**

**Our providers will be required to extend members the same discounts for services that would have been covered under a member's plan but are not covered due to certain circumstances, which may include the following:**

**The member has exceeded their visit limits for a service like cleanings or X-rays.**

**The member has exceeded their annual benefit maximum.**

**The member is over the age limit for a service such as fluoride varnish. This does not apply to orthodontia care.**

**The member gets a service that is covered by an alternative benefit, such as posterior tooth white fillings. Going forward, the provider will extend members the discount for the white fillings.**

**The member is still in their waiting period.**

**The member has exceeded their lifetime maximum for a service.**

**Are there services that are excluded from this enhancement?**

**Yes there are. This enhancement only applies to care that is included among the benefits coverage of the member's plan. It does not apply to services their plan does not already cover, such as cosmetic care or tooth whitening. In addition, there are specific situations that are excluded from this enhancement. These include:**

**General anesthesia and IV Sedation that is not in conjunction with the surgical removal of impacted teeth.**

**Implants that are not received in lieu of a three-unit bridge. The exception to this is for plans that include a benefit rider for implant coverage.**

**Orthodontia -This includes Invisalign, medically necessary orthodontia, and age-based restrictions for standard orthodontia care.**

**Which networks does this apply to?**

**This enhancement will apply to all providers in all Delta Dental networks, but the availability of the enhancement benefit may vary from state to state.**

**Does this change members' coverage at all?**

**No, this does not change how we cover dental care. While members will get the Delta Dental discount on care in the situations described above, they will still be responsible for the remaining cost of care if they have used up their benefit dollars or are in any of the other situations described above.**

**Do you have questions?**

**We are here to help you make the most of this change to your plan. If you have questions, just contact your Account Executive.**