

CONNECTICARE DENTAL PLANS:

Important steps you can take to become an informed consumer of dental services

This guide provides a brief overview of some of the things you can do to maximize benefits from your Dental Benefits Plan. After all, the more you know, the more you'll be able to interact with your dentist to jointly determine the best course of care to fit your needs. By following the steps outlined below, you will become more informed about your dental benefits.

Important steps to follow

- 1. Familiarize yourself with your plan design:** Understand your dental benefits, including which services are covered, which services have cost shares (coinsurance), which services may have deductibles, and the benefit period of your dental plan (calendar-year or benefit year.)
- 2. Keep active records of your care:**
 - Keep track of your benefit usage.
 - Retain Explanations of Benefits (EOBs) or inquire online so that you know the remaining annual maximum amount of coverage available (if applicable) for you and your dependents.
 - Keep track of your last dental visits for exams, cleanings and X-rays so that you know when you are next eligible for those services.
 - Be sure to understand the frequency limitations of plan coverage for major services such as crowns, dentures, and bridgework.
- 3. Seek a predetermination for high-cost services:** Ask your dentist to submit a request for predetermination of any services expected to cost over \$300.00. Predeterminations will assist you in understanding what portion of a proposed treatment plan your dental plan will pay for and what portion will be your out-of-pocket cost. Predeterminations are not a guarantee of plan payment, as your benefits may be reduced by claims processed between the date that the predetermination was issued and the date that the predetermined services were actually performed.
- 4. Understand your treatment options:** Ask your dentist if there are any alternatives to his or her proposed treatment plan. There are a number of different ways to treat many dental conditions, with some options more costly than others. Your dentist should be pleased to discuss alternatives that include differences in costs, cosmetic results, treatment longevity and other factors. You and your dentist should make the final decision together regarding a proposed treatment plan after you fully understand all of the treatment and coverage issues.
- 5. Utilize network providers:** Use the services of dentists who participate in your dental plan's network. Participating dentists accept our fee schedule as the maximum they will charge for all covered services. By using a participating dentist, your dental benefit dollar will go farther. Members may receive services from dentists who do not participate in the ConnectiCare Dental Plan Networks. Nonparticipating dentists may balance bill for billed amounts over what the plan covers, and they are not limited in the amounts they may charge for their services.
- 6. Comparison Shop:** Shop around. Different dentists specialize in certain areas of oral health or in certain techniques, and dentists may set their charges for certain services independently. In dentistry, a higher or lower cost does not necessarily mean better or worse quality. We encourage you to use a cost effective provider who will provide quality care.
- 7. Take charge of your care:** Take your time when considering your dentist's proposed treatment plans. While certain dental conditions may be painful or uncomfortable, you will most often have some time to consider the best course of action. Your dentist should allow you time to consider lengthy and costly treatment plans.

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Dental Plans

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In-Network vs. Out-of-Network Cost Comparison Example

PROCEDURE	COINSURANCE (PLAN PAYS)	MAXIMUM ALLOWABLE CHARGE (Premium Network)	IN-NETWORK OUT-OF POCKET (Patient Responsibility)	OUT-OF-NETWORK
Filling (amalgam – 4 surfaces)	80%	\$190	20% coinsurance = \$38	Doctor's Fee = \$250, plan will pay \$152, patient responsibility = \$98
Crown (Porcelain/High Noble Metal)	50%	\$935	50% coinsurance = \$468	Doctor's Fee = \$1,150, plan will pay \$468, patient responsibility = \$682
Molar Endo. (Root Canal Treatment)	80%	\$880	20% coinsurance = \$176	Doctor's Fee = \$1,200, plan will pay \$704, patient responsibility = \$496

Note: These examples are for illustration purposes only and don't necessarily represent a given plan's coinsurance, actual out-of-pocket costs, or the effects of deductibles, if applicable.

Oral health resources that may provide helpful information

The ADA Public Oral Health Topics:

<http://www.ada.org/public/topics/alpha.asp>

The ADA Position Paper on Amalgam vs. Composite Fillings:

<http://www.ada.org/public/topics/fillings.asp>

The National Library of Medicine/NIH Medline Plus Dental Health Page:

<http://www.nlm.nih.gov/medlineplus/dentalhealth.html>

NIDCR (NIH) Oral Health Info:

<http://www.nidcr.nih.gov/OralHealth/>

HHS Women's Health on Oral Health:

http://www.womenshealth.gov/faq/oral_health.htm

American Academy of Periodontology Consumer Info:

<http://www.perio.org/consumer/index.html>

UConn's Healthnet Information Page on Oral Health:

<http://library.uhc.edu/departm/hnet/dentalhealth.html>

