

Marymount University

Questions and Answers

1. Is there a network with Delta Dental?

- Marymount University Dental Plan is a preferred provider program. This means you can obtain dental services from any dentist. The Plan covers the same services whether or not you use a network dentist, but your out-of-pocket costs will likely be lower when you use an in-network or participating dentist.
- There are two types of network dentists — **Delta Dental PPOSM** and **Delta Dental Premier[®]**. You may select the dentist of your choice. However, you will receive the highest level of benefits available in your group's program by choosing a Delta Dental PPO dentist. In addition, your out-of-pocket costs will likely be lower if you use a participating dentist. If you choose a:

Delta Dental PPO Dentist

- Payment will be made directly to the dentist for covered benefits.
- Delta Dental's payment will be based on the Delta Dental PPO allowance for covered benefits.
- The dentist will accept Delta Dental's payment, plus any required co-insurance and deductible (if applicable) as payment in full for covered benefits.

Delta Dental Premier Dentist who is not a Delta Dental PPO Dentist

- Payment will be made directly to the dentist for covered benefits.
- Delta Dental's payment will be based on the Delta Dental PPO allowance for covered benefits.
- Delta Dental Premier Dentists have only agreed to accept the Delta Dental Premier allowance as payment in full. You will be responsible for any required co-insurance and deductible (if applicable) as well as the difference between the Delta Dental Premier allowance and the Delta Dental PPO allowance for covered benefits.
- The amount you would owe a Delta Dental Premier Dentist who is not a Delta Dental PPO dentist may be higher than the amount you would owe a Delta Dental PPO dentist for the same covered benefits.

Non-Participating Dentist

- Payment will be made directly to you (unless Virginia law requires otherwise).
- Delta Dental's payment will be based on Delta Dental PPO allowances for covered benefits.
- You will be responsible for any required co-insurance and deductible (if applicable) as well as the difference between the non-participating dentist's charge and Delta Dental's payment for covered benefits.
- The amount you would owe a non-participating dentist may be higher than the amount you would owe a Delta Dental PPO or Delta Dental Premier dentist for the same covered benefits.



Example:

NETWORK	PPO Network Dentist	Premier Network Dentist	Non-Participating Dentist
Dentist's Charge for Filling	\$90.00	\$90.00	\$90.00
Delta Dental's Plan PPO Allowance	\$70.00	\$70.00	\$70.00
Coinsurance Percentage	90%	80%	80%
Delta Dental's Payment	\$63.00	\$56.00	\$56.00
Delta Dental's Contracted Premier Plan Allowance	N/A	\$80.00	N/A
Patient Payment*	\$7.00	\$24.00	\$34.00

In this example, the patient's out-of-pocket cost is lower using a Delta Dental PPO Dentist.

All Delta Dental dentists agree to:

- Complete the dentist's portion of the claim form and submit the claim directly to Delta Dental.
- Accept Delta Dental's payment and any patient coinsurance as payment in full for covered benefits.
- Participate in Delta Dental's quality assurance programs.

2. How can my dentist enroll in the Delta Dental network?

Ask your dentist to contact the local Delta Dental in your state or have the dentist contact Delta Dental's Provider Relations Department at 1-800-367-3531.

3. Will I receive an ID card?

All employees who enroll in a Delta Dental plan will receive two new ID cards. You may obtain additional ID cards by calling Delta Dental's Benefit Services Department at 800-237-6060 or you can print a copy by visiting our website at DeltaDentalVA.com.

4. What do I need for my first dental appointment under the New Plan?

- Present your new ID card or give the dentist your Social Security Number.
- Tell the dentist your Dental Plan is administered by Delta Dental of Virginia.
- Claim forms are generally filed directly by the dental offices. Delta Dental will accept any standard ADA-approved claim form. Claim forms are available at DeltaDentalVA.com or by calling Delta Dental's Benefit Services Department at 800-237-6060.

5. How can I avoid unexpected charges for dental care?

- See a dentist who participates in the Delta Dental PPO and/or Premier network.
- Ask your dentist to file a pre-determination of benefits before treatment begins (not required but recommended for services over \$250).
- Call Delta Dental's Benefit Services Representatives with any benefit clarification questions.

6. What if my spouse, dependents or I am currently involved in orthodontic treatment?

- If you, your spouse or dependents are currently involved in orthodontic treatment, please inform the treating orthodontist that your dental carrier will soon change. Effective January 1, 2019 for the High Plan only, Delta Dental of Virginia will be administering your dental plan.
- Once your coverage with Delta Dental has become effective, advise your orthodontist to submit a claim form containing the following information to Delta Dental: total case fee, initial banding date, initial down payment, total treatment months, employee's name and subscriber identification number, patient's name and date of birth, orthodontist's name, tax ID and license number.
- If you, your spouse or dependent were enrolled under your employer's prior dental plan, Delta Dental will make monthly payments based on the difference in this Plan's lifetime orthodontic maximum and the total amount paid by the prior dental carrier.
- If you, your spouse or dependent were not enrolled under your employer's prior dental plan, Delta Dental will pro-rate the remaining treatment and make monthly payments based on that calculation and this Plan's lifetime orthodontic maximum.

7. What if I have used my orthodontic lifetime maximum under the MetLife's dental plan — will I receive a new \$1,500 lifetime maximum under Delta Dental's program?

No — the \$1,500 lifetime maximum for orthodontic services is intended to extend over your lifetime and does not begin anew when there is a carrier change. Monies paid by MetLife for these services will transfer to Delta Dental, which means you and your covered dependents will not receive a new \$1,500 lifetime maximum if \$1,500 was paid by MetLife previously.

8. How does Delta Dental handle work in progress, e.g., a root canal was performed prior to January 1, 2019, but the crown is placed AFTER January 1, 2019?

If you have a treatment in progress as you are joining Delta Dental, we aim for a smooth transition. Typical benefit categories that have procedures that may overlap carriers include endodontics (root canals) and major restorative services (crowns). Root canals and crowns often require several weeks for completion. If a root canal was performed prior to January 1, 2019, the prior carrier would be responsible for payment of the root canal claim. Delta would be responsible for payment of the crown placement — as long as the crown procedure has not begun prior to the effective date of January 1, 2019. If the tooth has been "prepped" (meaning work has begun on the crown procedure) prior to January 1, 2019 the claim should be paid by the previous carrier.