

Susquehanna Dental West

Understanding Dental Insurance

The intent of all dental insurance plans is the same: to help pay a **portion** of the cost of dental care. Sorting through the complexities of different insurance plans, however, can be difficult. Ultimately, patients are responsible for knowing what their individual coverage is. Plan sponsors (usually the employer) are required to provide information detailing what is and what is not covered. Keep in mind that most plans limit the yearly dollar amount that will be paid.

Three types of dental benefit plans currently exist:

- **Traditional** or “fee-for-service” plans allow patients to seek care from the general dentist or specialist of their choice. Traditional plans provide benefits based upon either a fee schedule or a percentage of what the insurer determines to be usual, customary and reasonable (UCR) fees. Patients may be responsible for the difference between the UCR fee and the dental office’s regular fee.
- In a **direct reimbursement** plan, the patient pays the dental bill and submits the receipt to the employer for reimbursement. There are no restrictions other than the limitation on the total dollar amount that will be paid.
- **Managed care** plans restrict your choice of dentists; they will only pay maximum benefits if the services are provided by a dentist in their plan. Like traditional plans, they limit the type and frequency of care and require the patient to pay the difference between the covered amount and the dentist’s fee.

Regardless of the type of plan you have, there are a number of terms you should familiarize yourself with, including:

- **Deductible** — the amount you pay personally before the dental insurance plan kicks in
- **Copayment** — your share of the financial responsibility for a specific dental service
- **Limitations** — such as waiting periods before coverage begins or a restriction on the frequency of some services.
- **Exclusions** — treatments not covered such as implants or preexisting conditions
- **Annual or lifetime maximum benefit** — dollar limit of the insurer’s financial responsibility
- **Participating or “par” dentist** — if the dentist is par with a particular insurance plan, that dentist is contracted to accept the insurance company’s allowance as the starting point for your benefits. This doesn’t mean that you won’t have any coinsurance at all. If you have coverage that is only a percentage of the total allowance, you will still be responsible for your portion, but it will be calculated upon the allowed amount, which is usually less than the doctor’s submitted fee
- **Non participating or “non par”** — if the dentist is non participating with your insurance plan, you are responsible for the entire dentist’s fee regardless of what the insurance company may reimburse you
- It’s also a good idea to check if the plan has a “freedom of choice” or “point-of-service” option. These enable you to seek care from a practitioner of your choice. Under most plans, you will not receive full benefits if you select a practitioner not associated with the plan. Otherwise, you can always go to the dentist of your choice if you are willing to pay yourself.

If a plan doesn’t cover a procedure that is recommended by your dentist, this doesn’t mean that the treatment isn’t needed; it only means that the procedure falls outside of the scope of the coverage included in your plan. Limitations in coverage are the result of the financial commitment your plan sponsor or employer has agreed to make and the benefits the insurance company will offer in exchange for that commitment.

What should I do if I have a concern or complaint about my dental plan?

Dental benefit plans are the result of a contract between your employer and the insurance company. Your dentist often cannot answer specific questions about your dental benefits or predict what your level of coverage will be because plans vary according to these contracts. Therefore, your concerns should be directed to your employer (usually the human resource department or benefits manager) or plan sponsor.