🛆 DELTA DENTAL°

2015 FAQ – A Dental Perspective On Health Care Reform

NORTH DAKOTA

For Employers

What are the key dental insurance requirements under the Patient Protection and Affordable Care Act (PPACA)? Are employees required to have dental coverage?

As part of health care reform, there's no requirement for adults to have dental coverage. However, Pediatric Dental is one of 10 Essential Health Benefits (EHBs) that medical carriers must offer to fully insured groups with 50 or fewer full-time equivalent employees – both inside the North Dakota Insurance Exchange and outside the exchange for non-grandfathered medical plans.

Pediatric Dental EHB coverage can be included as part of a medical plan, or the coverage can be obtained through a stand-alone policy like Delta Dental[®] offers. Stand-alone coverage is the way the vast majority of dental plans are purchased today.

Inside the exchange, employees from an insured group of 2-50 full-time equivalent employees may purchase Pediatric Dental EHB coverage either with their medical plan or on a stand-alone basis.

What has changed for 2015?

Certified Pediatric Dental members to age 19 have an annual maximum out-of-pocket cost of \$350 for one child and \$700 for two or more children per family.

Are there specific dental insurance requirements for fully insured groups of 51+ or self-insured (ASO) groups?

Pediatric Dental EHB requirements don't apply to groups with 51 or more full-time equivalent employees (insured or self-funded) when covered under a stand-alone dental contract.

How was the Pediatric Dental EHB coverage determined and defined by the state of North Dakota for the exchange? Is coverage consistent from carrier to carrier?

In North Dakota, a benchmark plan was selected by the state to establish services included in the Pediatric Dental EHB plan. Coverage above the minimum requirement may vary from carrier to carrier.

For Pediatric Dental EHB coverage, when does a child's coverage transition to an adult plan? What is the maximum age for Pediatric Dental EHB coverage?

Pediatric Dental EHB coverage is available through age 18. With our Pediatric Dental EHB coverage, a child transitions to an adult plan at age 19. They can remain covered as a dependent on a family policy until age 26. Can fully insured small groups (2-50 full-time equivalent employees) purchase a dental plan with the Pediatric Dental EHB coverage separate from their medical plan?

Yes, Delta Dental is offering two stand-alone Pediatric Dental EHB plans through the exchange. This means insured groups of 2-50 full-time equivalent employees can purchase a plan with Pediatric Dental EHB coverage that's separate from their medical plan, which is the way the vast majority of dental plans are purchased today.

Is coverage for adults also available?

Yes, Delta Dental is offering seven Adult/Family plan options that can be purchased together with Pediatric Dental EHB plans through the exchange.



What's the advantage to purchasing stand-alone dental coverage?

Purchasing a stand-alone dental plan can prove very beneficial for groups and subscribers. For example:

- With a stand-alone dental plan, members benefit from superior dental networks, customer service exclusively focused on dental and dedicated dental claim processing.
- A medical plan offering dental coverage may have a large combined deductible. Non-preventive dental services may not be covered until the medical deductible is satisfied, whereas a stand-alone dental plan would have a much smaller deductible to satisfy before benefits apply to non-preventive services.

What are the highlights and features of your Pediatric Dental EHB plans and associated Adult/ Family plans?

Delta Dental has two Pediatric Dental EHB plan options – Plan A (lower benefit level) and Plan B (higher benefit level). Both feature:

- No waiting periods or coinsurance for diagnostic/ preventive services.
- 100% coverage for covered services after \$350 out-of-pocket costs (\$700 per family).
- \$1,000 annual plan maximum for out-of-network services.
- Maximum of three child premiums per family.
- Negotiated discounts and claim savings through the Delta Dental PPOSM network and Delta Dental Premier[®] network, which is one of the largest networks in the state.

In addition, Delta Dental has seven Adult/Family plan options that can be purchased together with a Pediatric Dental EHB plan through the exchange. These Adult/Family plans can also be purchased on their own outside the exchange, without a Pediatric Dental plan. Plans range from preventiveonly to comprehensive, balancing cost and coverage for enhanced flexibility and choice. Can insured groups (2-50 full-time equivalent employees) purchase a dental policy outside the exchange? Will this satisfy the PPACA law for Pediatric Dental EHB coverage?

A certified stand-alone dental plan like Delta Dental offers can satisfy the requirements of Pediatric Dental EHB coverage.

We will continue to offer a wide spectrum of standalone dental plans and new options outside the exchange to help groups meet their unique needs, including:

- Our two new Pediatric Dental EHB options and seven Adult/Family plans for small groups.
- A variety of our traditional community-rated group plans.

Where will your Pediatric Dental EHB plans and Adult/Family plans be available outside the exchange for groups to purchase?

For plan details, go to www.deltadentalmn.org. We encourage groups to talk with their broker or contact Delta Dental ConnectSM (1-800-906-5250) for personal assistance.

How is Delta Dental addressing group renewals in 2015?

Traditional groups will renew with the current levels of coverage they selected in 2014 if available. Groups who selected to "pair" their plan with a Pediatric Dental plan to receive blended rates will renew with certified Pediatric benefits embedded where available. Pediatric members will receive the adult level of benefits the month following when they turn age 19.

If your traditional plan does not include the availability to embed Pediatric Dental, a stand-alone Pediatric plan can be purchased if needed. What should groups do if they are renewing a Discover plan or any other plan that doesn't include the Pediatric Dental EHB coverage?

These groups can purchase one of our stand-alone Pediatric Dental EHB plans if needed.

For more information, visit the following Web sites:

U.S. Department of Health & Human Services www.hhs.gov/healthcare Health Insurance Markeplace www.healthcare.gov





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