

Glen Cove CSD Dental Change FAQ - DHMO

Guardian (Group #037710) Effective 9/1/2022

Q: What do I need to do in order to be enrolled?

A: In order to be enrolled in the DHMO you will need to complete and return an enrollment form no later than September 30, 2022. Please remember to include a provider ID on your enrollment form or it will be returned.

Q: What happens if I miss the September 30, 2022 deadline?

A: The next opportunity to enroll in the DMO would be during open enrollment. Open enrollment is October 1 – October 30 to be effective January 1st.

Q: Who are good candidates for the DHMO?

A: The DHMO is a cost-effective dental option designed to keep premiums and out of pocket cost low. We typically see 3 types of people join the DHMO.

- People with very good teeth. If you only receive preventive care (cleanings, x-rays ...) you will not pay anything out of pocket when you go to the dentist nor will you pay a premium out of your paycheck each month.
- People with very bad teeth. If you need extensive dental work the DHMO is best because each service is less expensive but more importantly there is no annual maximum of \$1,250 like the PPO.
 - Under the PPO the carrier will only pay out \$1,250 per calendar year. Anything over that amount is the patient's responsibility.
- People who have children who need orthodontic work or people who need orthodontic work themselves. Under the DHMO you would pay a flat fee of \$1,500 for dependents under the age of 19 or a flat fee of \$2,800 for anyone covered over the age of 19 for orthodontic work
 - You are allowed to change to the DHMO for braces then change back to the PPO during open enrollment if you wish.

Q: How to the DHMO benefits work?

A: Instead of a co-insurance percentage like a PPO dental policy, the DHMO has a separate fee for each separate procedure. It's like going to a restaurant where every service is listed on the menu with a different price you will pay for each. The prices listed are much lower than what you would normally pay under the PPO and you are not limited to the \$1,250 annual max that the PPO has. You may elect to have multiple root canals and crowns in the same year and you would pay the same price for each.

Q: What are some examples of out-of-pocket costs under the DHMO?

A: Oral Exam - \$0, Cleaning - \$0, X-Ray - \$0, Filling - \$20, Root Canal (Molar) - \$192, Crown - \$430.

Q: What is the catch?

A: You must be assigned to a general dentist that is in network with the DHMO network and you must use them for your general dental work. You are welcome to see a specialist as well but they must also be in the DHMO network. The catch is that the DHMO network is usually smaller than a PPO network. If you use a general dentist that you are not assigned to, you will not receive any benefits and all expenses will be out of pocket.

Q: What if I have a dental appointment scheduled for after 9/1/2022?

A: If the appointment is with the provider you will be assigned to in the DHMO please call them to inform them that you are changing to the DHMO prior to your appointment. If the appointment is with a provider other than the provider you will be assigned to you will need to cancel that appointment and schedule one with the provider you are assigned to.

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Q: How do I know if my dentist is in the DHMO network?

A: Below are instructions on how to find an in network DHMO provider.

- On the top of the home screen, you can hover over “connect with us” and then click on the “find a provider” link that appears.
- The next page will automatically default to the PPO network, you need to change it to the “Managed Dental Care” option right below PPO. You can then enter a zip code in the location box and click on the green search button on the right.
- Once clicked, every provider that appears is in the Guardian DHMO network. ***Please make a note of the “PCD ID#” listed for the provider you want to be assigned to as you will need to enter it on your enrollment form.***
- You can add a dentist or office name next to the zip code at the top of the page if you want to search for a specific provider.
- Once you click search you can then filter the providers by specialty on the left side of the screen. You do not need to be assigned to a specialist but you must use one that is in the DHMO network.

Q: If I currently have work in progress, how will it be handled? (Ex. I have a temporary crown on my tooth right now and am scheduled to get a permanent crown after 9/1/2022)

A: If you are in the middle of a dental procedure, it is not recommended to change to the DHMO until that procedure is completed because there is no coordination of benefits between a PPO and a DHMO policy.

Q: What if I don't like the DHMO provider I selected?

A: You may change DHMO providers once per month. The change must be received prior to the 15th of the month in order to be effective the 1st of the following month.

Q: What if I want to go back to the PPO plan?

A: You may change to and from the PPO policy once per year only during open enrollment.

Q: Will I get an ID card?

A: Yes, an ID card listing the provider you selected will be delivered to your address around the 9/1/2022 effective date.

Q: My child is in the middle of an orthodontic treatment, what happens if my dentist is now either in or out of network when they were not before?

A: There is no Orthodontia Transition of Care with the DHMO. Under the DHMO, the member will still be responsible for the Orthodontia Copay. We do not recommend a transfer to the DHMO plan if your dependent is in the middle of orthodontic treatment.

Q: I have more questions, who can I talk to?

A: If you have any questions that are not answered above, please call Ryan Stewart at 516-357-9017. He will personally work with you and get an answer to any dental questions you may have.