

# CHOOSING THE RIGHT DENTAL PLAN

A Guide to Help You Think Through What's Right for You



# **Plan Selection Guide**

Premiums, co-pays, open access, rosters, capitation. OPPO, DHMO, DMPO, Fee-for-Service, innetwork, out-of-network...is your mind spinning yet?

All the things you need to take into consideration when choosing the right dental plan for you and your family can be overwhelming, to say the least.

This guide will help you make sense of the confusion when choosing a plan!

## **Some Big Considerations**

## **Premiums:**

A premium is a monthly fee that is paid to an insurance company to provide dental coverage for services. Be sure to pay attention to annual premium costs when considering dental benefits. Anticipate you and your family's needs.

## **Co-Payments:**

This is an out-of-pocket payment made by an insured person at the time of each dental service. The key to keeping co-payments down with any plan you choose is to have your dental work done by an in-network provider. Co-pays vary from plan to plan. Refer to your schedule of benefits to find your exact level of coverage. At Solstice, for example, the biggest bang for your buck is through our DHMO plan. You get two preventive cleanings a year at NO co-pay. When choosing your plan, those features are something major to consider for effective cost savings.

## **Open Access vs. Capitation:**

An *open access network* is one in which providers in the plan's network can be used freely without a referral. You never need to pre-select a provider. This is sometimes called 'a roster' or 'primary care dentist.' And, you can switch providers as many times through the contract year as needed.

Open access removes the rosters process, so you see your doctor and get the treatment you need quickly. You don't have to worry about calling customer service to select a doctor or waiting up to a month to be added to their roster, then waiting for an appointment, calling back to change providers, etc. This is a big advantage.

In a *capitation model*, providers are paid a fixed and prearranged amount for each patient seen, regardless of any treatments or services being offered. In theory, capitation lowers the cost of treatment per patient. This is because costs are shared by other members in the system. However, under this model, you have to choose a provider and then are locked into seeing only that provider. You should consider this when making your choice.





# **Understanding Dental Plan Types**

#### **DHMO:**

Dental Health Maintenance Organization (DHMO): With this type of plan, you pre-pay for dental benefits through your premiums and co-payments. Then, you receive care through a network of dentists. DHMOs typically provide coverage for your basic care, reduce out-of-pocket costs and limit paperwork.

Solstice's DHMO plans are unique in that we are non-capitated without rosters. This means you have the freedom to select any Solstice provider without having to be assigned to his/her office roster. Your wait time to be seen by a dentist is reduced, and allows for a higher standard of care and customer experience.

#### **Discount:**

Discount Dental Plan (DMPO): This plan is an affordable alternative to traditional dental insurance. Members have access to a large network of participating dentists who have agreed to offer their dental services at discounted fees. While this plan is not insurance, discount dental plans offer:

- No annual limits You enjoy discounts on most dental care services all year long
- No claims You simply present your membership card at a participating dentist office for discounts on most dental services

Even if you already have dental insurance, the discounts offered by discount dental plans may be used along with your dental insurance for even more savings on your dental care.

### **DPPO:**

Dental Preferred Provider Organization (DPPO): With this plan, network dentists agree to a negotiated fee schedule as payment for their services. Members are offered added discounts and incentives to use dentists who participate in the network. You may choose to receive services from any dentist but you will get the highest level of savings by selecting an in-network dentist.

#### **Fee-For-Service:**

This plan allows you to receive care from the dentist of your choice. Your co-payment at the dentist office is based on a fee for each service provided.

Solstice's Fee-for-Service plans are unique in that we do not have rosters. This means that you have the freedom to select any Solstice provider without having to be assigned to their office roster.

As with DHMOs, this reduces your waiting time to be seen by a dentist, and allows for a higher standard of care and customer experience.

When it's time to make a choice, take your time! Think about your unique needs and those of your family.

Ask questions and get the answers you need to make an informed decision you're happy with.

And, as always, Solstice is here for you! Just give us a call at 1.844.224.4903