

NEW Special Health Care Needs Benefit

1. What is the purpose of the Special Health Care Needs benefit?

For the nearly 6.5 million people in the U.S. with intellectual or developmental disabilities, oral health care can be inaccessible or overwhelming.

The American Academy of Pediatric Dentistry defines special health care needs as any physical, developmental, mental, sensory, behavioral, cognitive, emotional impairment or limiting condition that requires medical management, health care intervention, and/or the use of specialized services or programs. The condition may be congenital, developmental, or acquired through disease, trauma, or environmental cause, and may impose limitations in performing daily activities. Individuals who fall into these categories often require extra care.

Delta Dental believes that everyone deserves a healthy smile and access to proper oral health care.

2. What is included in this benefit?

- ✓ Additional exam benefits are included for extra consultations with the dentist that may be necessary to help patients understand what to expect before treatment.
- ✓ Up to four dental cleanings in a benefit year.
- ✓ Treatment delivery modifications, including anesthesia, that are necessary for dental staff to provide oral health care for patients with sensory sensitivities, behavioral challenges, severe anxiety, or other barriers to treatment.

3. What are the oral health conditions often associated with special health care needs patients?

- ✓ buildup of calculus resulting in increased gingivitis and risk for periodontal disease
- ✓ thin or missing enamel
- ✓ dental caries
- ✓ crowding of teeth
- ✓ anomalies in tooth development, size, shape, eruption, and arch formation
- ✓ patients with special health care needs generally require more frequent dental visits and special accommodations in the delivery of care

4. Who qualifies?

Covered members with a special health care need such as any physical, developmental, mental, sensory, behavioral, cognitive, emotional impairment or limiting condition that requires medical management, health care intervention, and/or the use of specialized services or programs. Individuals who fall into these categories often require extra care when they visit the dentist. All covered members with a special health care need are eligible for this benefit.

5. Is there an age limit to receive this benefit?

There is no age limit.

6. How does a member use this benefit?

Covered members need to let their dentist know that their Delta Dental group plan includes the Special Health Care Needs benefit and that they have a special health care need. The Dentist should verify the benefit before rendering services. Delta Dental created rules to allow for additional benefits for members with special health care needs. We recommend that the member take the “Special Health Care Needs Benefit – Dentist Instructions” flyer to their dental visit.

7. How is anesthesia covered?

Anesthesia will be paid at 100% of the allowable fee, not subject to any limitations, up to the annual maximum.

8. Do benefit limits apply?

Yes, just like any other covered dental service, this would apply to the general annual maximum limitations.

9. What is the cost?

For fully insured customers, there is no financial impact on Risk rates.

ASO customers: There is no impact on the administrative fee paid to Delta Dental. The claims cost impact has been actuarially determined to be minimal. In addition, the certificate maximum still applies. Please contact your dedicated client manager for additional information.

10. How do Self Insured, ASO groups opt-in?

Contact your Delta Dental account representative to add this benefit to your dental plan. Once added, you can download and share the flyers with your covered members.

The policy anniversary date is preferred, but the benefit can be offered at any date.

11. Will this impact the ASO contract?

No. Your Delta Dental Plan Summary will be updated at renewal. Educational flyers are available to help employees understand the benefit. Visit www.deltadentalinc.com/specialhealthcareneeds for resource materials.

12. How do Fully Insured groups opt-in?

All Fully Insured Groups will have this benefit added automatically, effective April 29th as part of their standard dental benefit package.

13. How does the dentist verify benefits?

The dentist verifies eligibility like they would with any other benefit.