

Dental FAQ

Q1: What are dental benefits?

A1: Dental benefits provide coverage for various dental care services, such as routine check-ups, cleanings, fillings, and more. These benefits help you maintain good oral health and can save you money on dental expenses.

Q2: Who is eligible for dental benefits?

A2: All regular Full-Time and Part-Time Team Members are eligible for dental benefits. There are Full-Time Dental plans and a Part-Time Dental Plan. The Full-Time dental plans are offered through BCBSTX, and the Part-Time Dental plan is available through Delta Dental as the insurance provider.

Q3: What services are covered by dental benefits?

A3: Dental benefits often cover a range of services, including but not limited to:

- Routine cleanings and exams
- X-rays
- Fillings and sealants
- Root canals
- Extractions
- Crowns and bridges
- Orthodontic treatments (such as braces)
- Dentures and partials

Q4: Are there any limitations or exclusions to dental coverage?

A4: Yes, certain limitations and exclusions may apply. These could include waiting periods before certain services are covered, restrictions on the frequency of certain treatments, and exclusions for cosmetic procedures. It's important to review the plan documents for specific details.

Q5: How do I find a dentist who accepts my dental insurance?

A5: Our dental plans have a network of participating dentists. You can visit the plan provider's website (BCBSTX.com or deltadentalins.com) or contact their customer service to find a list of in-network

dentists in your area. While you can see an out-of-network dentist, it may result in higher out-of-pocket costs. Full-Time Team Members can also contact Health Advocate for help finding in-network coverage.

Q6: How does the claims process work for dental benefits?

A6: Typically, your dentist's office will submit the dental claim to the insurance provider on your behalf. Once the claim is processed, you will receive an Explanation of Benefits (EOB) that outlines the services provided, the amount covered by insurance, and any remaining balance you are responsible for paying.

Q7: How much will I have to pay for dental services?

A7: Your out-of-pocket costs will depend on your specific dental plan. This may include factors such as deductibles, co-payments, and co-insurance. Review your plan documents or contact your insurance provider to understand the details of your cost-sharing responsibilities.

Q8: Can I change my dental plan during open enrollment?

A8: Yes, open enrollment is the designated time each year when you can make changes to your benefits, including your dental plan. Additionally, you may be able to make changes after certain qualifying life events, such as marriage, the birth of a child, or a change in employment status. For Qualifying life events, please make sure to reach out to Benefits@athome.com within 31 days and provide the required documents. Reach out and let the team know what the qualifying event is and they will advise you what documentation is required.

Q9: How can I add my spouse or dependents to my dental plan?

A9: During Open Enrollment you can add your spouse or dependents to your dental plan. During the plan year, you can add them following a qualifying life event, such as marriage, the birth of a child, or a change in employment status. Please note that we verify all dependents through a 3rd party vendor, UnifyHR, so after adding your dependents, make sure to follow up with UnifyHR and send in your requested verification documents to ensure your dependents remain covered under your plan.

Q10: How can I make the most of my dental benefits?

A10: To maximize your dental benefits:

- Schedule regular preventive check-ups to catch and address issues early.
- Use in-network providers to minimize your out-of-pocket costs.
- Understand your plan's coverage and limitations to make informed decisions.

Q11: Do I get an ID Card?

A11: This depends on your selected plan and insurance provider.

BCBS for Full-Time Team Members: You will get an ID card mailed to you from BCBSTX. If you are on a family plan, please note that you will get only 1 card for the family. If you have medical and dental through BCBSTX, you will get 1 medical and 1 dental card. You can download the BCBSTX mobile app to get a digital ID card and download a copy to your mobile wallet (Apple or Samsung only). If you lose your card, please call BCBSTX or log in to BCBSTX.com to request a replacement.

Delta Dental for Part-Time Team Members: You will NOT receive a Dental ID card from Delta Dental. You can just let your Dental office know that you are with Delta Dental, give them your SSN and let them know that you work for At Home and they should be able to pull you up in the system. You can download the Delta Dental mobile app to get a digital ID card and download a copy to your mobile wallet (Apple or Samsung only).