Miami-Dade County Public Schools Humana Dental Plans

Frequently asked questions (FAQ)

WHY IS DENTAL INSURANCE IMPORTANT?

Brushing and flossing can't replace regular dental checkups. Twice-yearly visits help keep teeth and gums healthy and allow your dentist to catch problems before they cause pain or discomfort.

HOW DOES THE DENTAL PLAN SAVE MONEY?

Members and their families can save on covered services by choosing in-network dentists with negotiated discounts. Participating network dentists cannot bill members more than the negotiated fee for covered services, helping reduce out-of-pocket costs for needed care.

HOW DO I FIND A PARTICIPATING DENTIST?

Our dental provider search makes it easy to find an in-network provider:

- Go to **www.Humana.com/findadentist** and search as a guest by entering the desired zip code
- Under coverage type select **PPO or DHMO**
- Under Network Select either
  - **For PPO Plans: PPO/Traditional Preferred**
  - **For DHMO Plans: MDCPS DHMO**
- Then you can search by the dentist's name, specialty, or all. Verify the Dentist is accepting new patients and participating.

MAY I CHOOSE A NON-PARTICIPATING DENTIST?

PPO plans allow out-of-network dentists, but they may balance bill for charges above your Humana Dental plan's covered amount. To avoid extra charges and save money, use a participating PPO Network dentist.

DHMO plans do not allow out-of-network providers. After you enroll in the DHMO and your plan is active, you will need to select a Primary Care Dentist (PCD) that is in network and accepting new patients. The dentist you selected will need to be assigned as your Primary Care Dentist (PCD) before you get dental services. To do this, contact Humana using the number on the back of your ID card and provide the Dental ID number for your chosen PCD. **Contact Customer Service at: 1-800-233-4013** Monday-Friday from 8AM-6PM

CAN I SEE A SPECIALIST?

Yes, If a member needs a specialist (i.e., endodontist, oral surgeon, periodontist, pediatric dentist), they may be referred by a participating general dentist, or members can self-refer to any participating specialist. Visit **Humana.com/findadentist** to find a participating specialist.

CAN I GET AN ESTIMATE OF MY OUT-OF-POCKET EXPENSES?

Yes. In the event dental treatment is expected to be more than $300, you or your dentist may submit a proposed dental treatment plan prior to your treatment that we will use to estimate if your dental benefits will cover the treatment. This is optional and not required. The estimate of dental benefits is not a guarantee of what we will pay. It tells you and your dentist in advance about the benefits that may be payable for the covered expenses in the pre-treatment plan.

HOW ARE DENTAL TREATMENTS IN PROGRESS COVERED? WHAT ABOUT MISSING OR EXTRACTED TEETH?

For work in progress, typically the prior carrier is responsible for services such as root canals, crowns, dentures, and bridges, if the treatment was initiated before coverage with Humana began.

Humana's dental plans generally do not cover replacement for a tooth extracted or missing prior to the date coverage starts unless: The device also replaces one or more natural teeth lost or extracted after the coverage became effective or the tooth was extracted while covered under the employee's previous dental plan immediately prior. We do not cover the replacement of congenitally missing teeth.

HOW ARE ORTHODONTICS COVERED?

Orthodontia is covered in the MDCPS Low and MDCPS High DHMO plans for adults and children at in network participating providers at a copay. Orthodontia is also covered in the PPO High plan. It is not covered in the PPO Standard plan however; members may receive a discount on non-covered services of up to 25%. Members may contact their participating provider to determine if any discounts are available on non-covered services. If you are currently in treatment, contact us for help transitioning your care.

HOW CAN I GET ADDITIONAL INFORMATION?

Once your plan is active, you can visit **MyHumana.com** to learn about your plan, to check your benefits, to use our Provider Locator, or you can Contact Humana Customer Care at **1-800-233-4013.** Monday-Friday, 8 AM-6 PM

If you have additional questions **prior to your effective date**, you can contact the Humana Hotline at **1-855-811-0409**, Monday-Friday, 8 AM-6PM.

This communication provides a general description of certain identified insurance or non-insurance benefits provided under one or more of our insurance benefit plans. Our insurance benefit plans have exclusions and limitations and terms under which the coverage may be continued in force or discontinued. For costs and complete details of the coverage, refer to the plan document or call or write your Humana insurance agent or the company. In the event of any disagreement between this communication and the plan document, the plan document will control.

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