



## **Benefits Basics #5: Understanding Your Dental Coverage**

*Updated for Dental Plan Changes Starting January 1, 2018*

Teamsters Security Fund for Southern Nevada—Local 14 offers two dental plan options for employees and retirees who are not yet eligible for Medicare. It's important to make the most of your dental plan so you can ensure you have healthy teeth and gums. Here's what you need to know.

### **Your Dental Plan Options**

- *Delta Dental PPO Plan; or*
- *Liberty Dental Plan DHMO-EPO (Benefit Plan NV-400)*

You choose a dental plan when you enroll for health & welfare benefits. You can change dental plans during the annual Open Enrollment period.

### **Delta Dental PPO Plan**

If you're enrolled in the PPO Plan, you have the flexibility to see any dental provider you choose and still receive coverage. However, you'll save more if you visit a dentist who participates in the Delta Dental PPO Network. It shouldn't be difficult to locate a participating provider—Delta is America's largest dental network.

### **How Does Using a PPO Provider Save Me Money?**

There's no cost to you when you see a Delta Dental PPO provider for a routine annual exam and x-rays or for two routine cleanings each year. For other covered dental expenses, Delta Dental PPO providers have agreed to charge discounted, pre-negotiated rates. Your share of the cost—your coinsurance—is 20% of this special rate. *For example, if your bill is \$250, you pay \$50 and the plan pays the rest.*

If you receive out-of-network dental care, your coinsurance amount will be higher. Plus, if the provider charges more than what the Fund considers to be the "allowable expense" for that service, you'll have to pay the difference, too.

*For example, let's say the Fund determines the allowable expense for your dental services is \$250, but the out-of-network provider charges \$300. You pay 20% coinsurance on the allowable expense, which is \$50. However, you also pay the difference between the provider's charge and the allowable expense, which is another \$50. So your total cost for the visit is \$100.*

### **Liberty Dental Plan DHMO-EPO (Benefit Plan NV-400)**

If you're enrolled in the Liberty Dental Plan DHMO-EPO (Benefit Plan NV-400), coverage is available only when you visit a Liberty Dental provider. If you visit an out-of-network provider, you will not be covered. Instead of coinsurance, you make a copayment for dental services. You can find the list of copayments in your enrollment packet.

Wondering which dental plan you're enrolled in, or have dental coverage questions? Get the answers you need from Zenith-American Solutions. You'll find their contact information on the back of this flyer.

#### **Delta Dental PPO At-A-Glance**

- No annual deductible.
- There's no cost to you for a routine annual exam/x-rays or for two routine cleanings each year.
- You pay 20% coinsurance for other covered in-network dental expenses.
- You can visit any provider you'd like and still receive coverage.
- The plan pays up to \$2,000 of covered dental expenses per calendar year.
- Orthodontia benefits are available for dependents to age 19, up to a total of \$1,200.

#### **Looking for a Dental PPO Provider?**

Visit [www.deltadental.com](http://www.deltadental.com) and use the "Find a Dentist" search box.

#### **Liberty Dental DHMO-EPO At-A-Glance**

- No annual deductible.
- You make a copayment for covered services, according to a set fee schedule.
- There's no cost to you for a routine annual exam/x-rays or for two routine cleanings each year.
- Both adults and children are eligible for orthodontia benefits.

#### **Looking for a Liberty Dental Plan DHMO-EPO Provider?**

Visit [www.libertydentalplan.com](http://www.libertydentalplan.com) and click the "Find a Dentist" tab, then select NV-100 through NV-700 from the Benefit Plan drop-down menu. Then follow the instructions to locate one in your area.

# The Answer Column

*In this column, we'll answer the benefits questions we're hearing the most frequently from our members.*

## Have Hospital Corporation of America (HCA) hospitals been dropped from the Health Services Coalition (HSC) network?

No, HCA hospitals are still part of the HSC network. HSC was able to negotiate an acceptable agreement with HCA. This means that the following facilities are still part of HSC and will be covered as in-network providers.

- Sunrise Hospital
- Mountain View Hospital
- Southern Hills Hospital
- Sahara Surgery Center
- Specialty Surgery Center
- Flamingo Surgery Center
- Las Vegas Surgery Center

## Why does the the PPO Medical Plan have more than one network for different types of services?

A variety of networks are available for various medical services, such as doctors, hospitals, and radiology. The Fund has identified and partnered with several of these networks to ensure the greatest provider discounts and lowest out-of-pocket expenses for members, combined with quality care. These networks do not overlap with each other – each has been selected for a different purpose.

When you need medical services, be sure to choose providers from these networks, based on the type of care you need:

- **Hospitals:** Choose Hospital Coalition providers from the list at [www.lvhsc.org/contracted\\_hospitals.html](http://www.lvhsc.org/contracted_hospitals.html).
- **Outpatient radiology services:** Choose one of these Preferred Partner Network (PPN) providers:
  - Steinberg Diagnostic Medical Imaging: call (702) 732-6000
  - Pueblo Medical Imaging: call (702) 228-0031
- **Mental health/substance abuse treatment:** Call the Harmony Healthcare EAP at (702) 251-8000 or visit [www.harmonyhc.com](http://www.harmonyhc.com) for an online provider directory.
- **All other providers:** Visit [www.anthem.com](http://www.anthem.com) and click “Find a Doctor” under “Menu.” Under “Search as a Member,” enter “JTF” below “Identification number or alpha prefix,” then click “Continue” and follow the instructions.

## Why should I contact the Employee Assistance Program?

If you find yourself with personal or work-related problems that are taking a toll on you, or if you just want to talk things over with someone who knows how to listen, contact our Employee Assistance Program (EAP). It's free, it's confidential, and professional counselors are available 24/7 to help you with a variety of issues, like:

- Marital and family concerns
- Depression
- Substance abuse
- Grief and loss
- Financial problems
- Other personal stressors

Your benefits include four free sessions with an EAP professional counselor at no charge to you. This benefit is separate from the mental health and substance abuse treatment coverage provided as part of your medical plan.

Call (702) 251-8000 or 1-800-363-4874 or visit [www.harmonyhc.com](http://www.harmonyhc.com) to find a counselor near you.



## Questions about your benefits?

If you have problems or questions about your coverage, visit the Zenith-American Solutions website at [www.teamsters14healthfund.com](http://www.teamsters14healthfund.com) or call the Teamsters 14 Customer Service Line at (702) 851-8286.