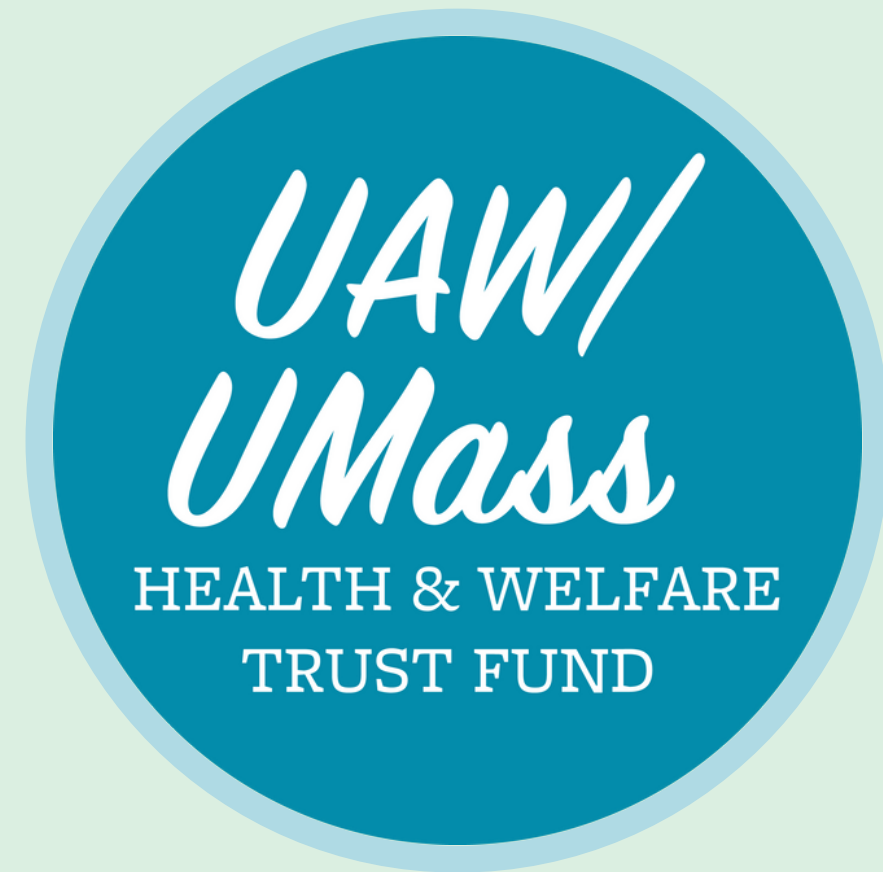


WISDOM TEETH 101

a guide for grad
employees



WELLFLEET
STUDENT





**Jaw pain? Swollen gums?
You might need your
wisdom teeth removed...**

*Your next steps
could save you a lot of money!*





First, check your coverage!

Eligible UMass Grad Employees have access to a student health insurance plan (Wellfleet/Cigna PPO Network) and a dental plan (Altus).

Give plan info for BOTH to your dental office.

Useful Terms

In-network (IN): dentist has negotiated lowest rates with insurance

Out-of-network (OON): dentist has no agreement with insurance

Deductible: a specified amount of money that you must pay before insurance will pay a claim

Plan year (PY): defined 12 month period. For health plan, plan year is 8/1-7/31 and for dental plan, plan year is 9/1-8/31.

Altus Dental coverage:

Plan pays 80%; Member Coinsurance 20%

- Extractions and other routine oral surgery when not covered by a patient's medical plan

Important to note:

- \$75 deductible if dentist is OON
- not required to be impacted
- Altus IN dentist will charge lowest rates
- OON dentists may balance bill if charges exceed what is reasonable & customary
- Max benefit payout per plan year is \$2250

altus
dentalTM

Student Health Plan coverage:

OUTPATIENT BENEFITS	In-Network	Out-of-Network
Impacted Wisdom Teeth Expense. For removal of one or more impacted wisdom teeth.	95% of Actual or Negotiated fee	

Important to note:

- *deductible of \$200 must first be met*
- *coverage for removal of IMPACTED wisdom teeth only*
- *CIGNA IN dentists may have negotiated lower rates*



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STUDENT



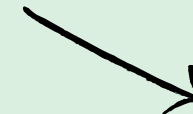
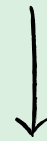
Next, choose the right dentist

*are your wisdom
teeth impacted?*

YES

NOT SURE

NO



choose any dentist
-95% of oral surgery covered by
Wellfleet after deductible

-a Cigna network dentist may
save you money & will submit the
claim for you

-Altus covers 80% of remaining
bill (after deductible if OON)

see a dentist for an
exam & xrays to
determine

-covered at 100%
with Altus IN or OON

**THEN RETURN TO THE TOP
OF THIS CHART**

best to choose an Altus IN
dentist
- 80% of oral surgery covered
-no deductible in network
-Altus network dentist will
submit the claim for you

Local dentists that take both plans

Chicopee Braces

601 A Memorial Drive Chicopee, MA 01020

(413) 420-2200

Holyoke Health Center, Inc

230 Maple St Holyoke, MA 01040

(413) 331-2124

COMM. HEALTH CTR OF FRANKLIN COUNTY

164 High St Greenfield, MA 01301

(413) 325-8700

You can find Altus In Network Dentists at altusdental.com and Cigna dentists at wellfleetstudent.com

Questions to Ask

1. Will the dental office submit your claims to both of your insurance plans?

- *Let them know you have a student health plan with coverage for removal of impacted wisdom teeth (Wellfleet/Cigna) & a dental plan (Altus).*
- *Some offices will say you don't have coverage under your health plan. Take a copy of your policy with you. Some offices will say that's only for children under age 21 (your health plan also has that), but show them your policy (pg 13). You can explain that this is student health insurance and the state requires the plan to cover removal of impacted wisdom teeth.*

Questions to Ask

2. If the office won't submit your claims because they're not in-network, will they hold your bill while you submit the claims?

- *Let them know you have a student health plan with coverage for removal of impacted wisdom teeth (Wellfleet/Cigna) & a dental plan (Altus).*
- *If they need confirmation of your coverage, they can contact the Trust Fund at (413) 345-2156*

Considerations

Consider what is most important to you when choosing an oral surgeon:

- Transportation--the ability to travel to surrounding towns opens up more options for surgeons who will bill your insurance*
- Total Cost--a surgeon in-network for both Cigna & Altus will result in the lowest costs*
- Convenience--if you're ok submitting you own claims, you can stay closer to Amherst when choosing a surgeon*
- Payment Up Front--if you can afford to pay upfront and be reimbursed you can stay closer to Amherst when choosing a surgeon*

How to Prepare

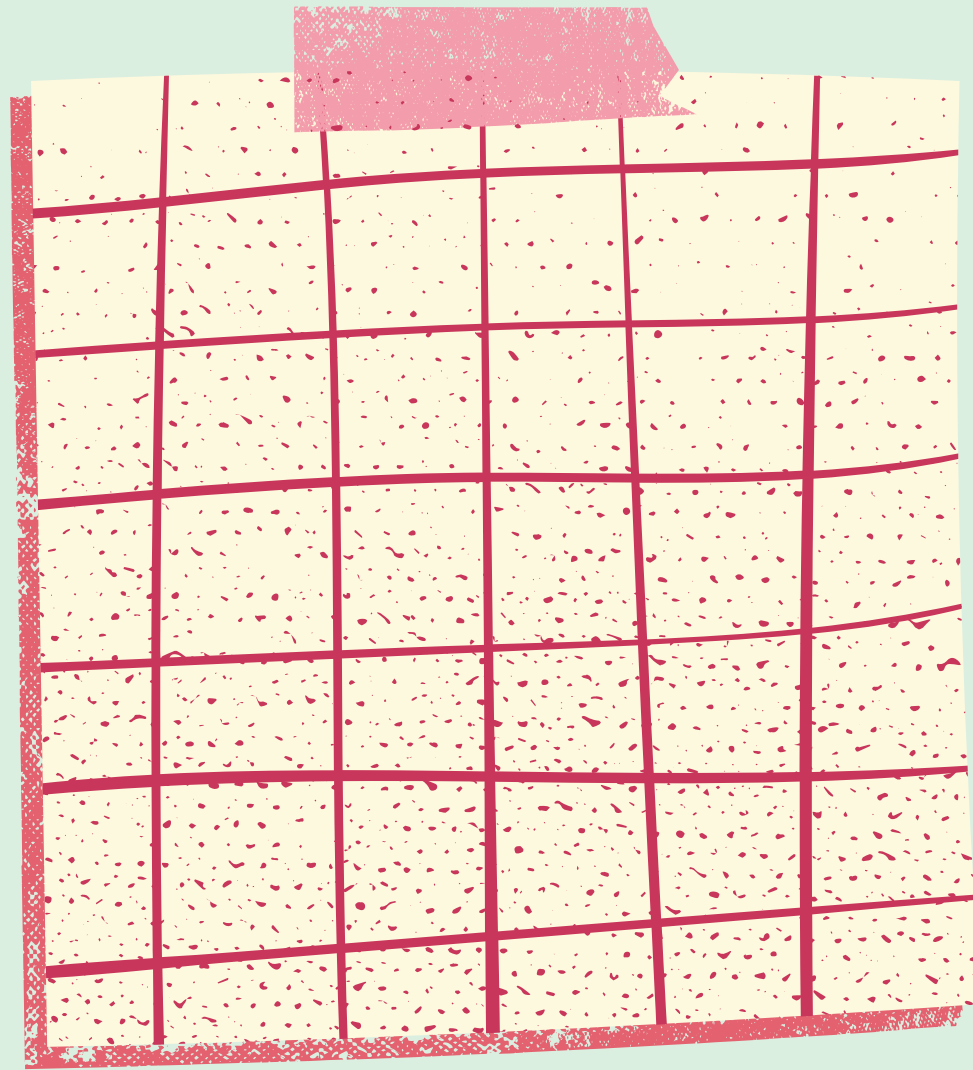
- register on altusdental.com and wellfleetstudent.com
- bring copies of both of your ID cards
- ask if your wisdom teeth are impacted
- find out if you've met your Wellfleet deductible; if yes, try to schedule surgery before a new plan year starts on 8/1
- if the surgery isn't urgent and you've already used your Altus plan year maximum, try to schedule surgery when the new plan years starts on 9/1
- provide the surgeon with copies of our Memo on Oral Surgery for Grad Employees
- share our contact info with your surgeon's office: UAW/UMass HWTF, (413) 345-2156
- be ready to assert your rights & choose a different surgeon if necessary
- stay on top of the process--don't let too much time go by if insurance doesn't seem to be processing the claim

Sample Breakdown of Your Benefits

These are just an examples. All situations are different and results will vary accordingly. That's why we recommend a pretreatment estimate and contacting customer service to talk through your situation:

Altus: (877) 223-0588 customerservice@altusdental.com

Wellfleet: (877) 657-5027 <https://wellfleetstudent.com/contact/>



Scenario #1: You see an oral surgeon that is IN for Altus, you haven't met your Cigna deductible yet and your wisdom teeth are impacted.



Oral Surgeon Charges \$4,200
Wellfleet deductible - \$200
Benefit paid at 95% = \$3,800
would be paid by Wellfleet
Remaining balance = \$400



\$400 balance + \$200 Wellfleet deductible will be considered
No Altus IN deductible - \$0
Benefit paid by Altus at 80% = \$480
Grad responsibility = \$120

Scenario #2: You see an oral surgeon that is IN for Altus, but your wisdom teeth are NOT impacted



Wellfleet plan isn't applicable in this case, as removal of non impacted wisdom teeth isn't covered by this plan



Oral Surgeon Charges \$1,575
No Altus IN deductible - \$0
Certain exceptions aren't covered -\$275
Negotiated fee reduces balance to \$586
80% of \$586 = \$468.80 would be paid by Altus Dental.
Grad responsibility = \$392.20

Explanation of Benefit Terms (EOB)

Dentist's Charges: what your dentist charged & sent to your insurance on the claim

Allowable Charges: amount an IN dentist is allowed to charge under their agreement with Altus.

% Coinsurance: % covered by your insurance

Plan Payment: amount insurance will pay

Processing Policies: notes on why certain procedure codes may not be covered by your insurance

Reading your Explanation of Benefits (EOB)

altus dental
Altus Dental Insurance Company, Inc.

P.O. Box 1557
Providence, RI 02901-1557

[REDACTED]

EXPLANATION OF BENEFITS (EOB)

Help Prevent Fraud:

Insurance fraud increases the cost of your dental coverage and is a crime. If you are aware of any false information submitted to us, you can help by calling us toll free at 1-877-223-0588.

THIS IS NOT A BILL

DATE OF ISSUE 4/20/2021
 PATIENT [REDACTED]
 DATE OF BIRTH [REDACTED]
 GROUP NO. [REDACTED]
 GROUP NAME [REDACTED]
 DENTIST [REDACTED]
 CLAIM DOCUMENT NO. [REDACTED] - 000
 SUBSCRIBER I.D. [REDACTED]

Payment for these services is determined in accordance with the specific terms of your dental plan or with the terms of applicable agreements with network dentists.

TOOTH NO. OR LETTER	DATE OF SERVICE	PROCEDURE NUMBER AND DESCRIPTION	DENTIST'S CHARGE	ALLOWABLE CHARGE	DEDUCTIBLE	% CO-INSURANCE	BALANCE	PLAN PAYMENT	PROCESSING POLICIES
Y	04/02/2021	4266 GUIDED TISSUE REGENERATION	275.00	0.00	0.00		0.00	0.00	721
31	04/02/2021	7210 EXTRACTION/ERUPTED TOOTH W/BONE REMOVAL	300.00	155.00	25.00	80	51.00	104.00	
	04/02/2021	9222 GENERAL ANESTHESIA- FIRST 15 MINUTES	300.00	92.00	0.00	80	18.40	73.60	

721 - TOOTH NUMBER AND/OR SURFACE(S) ARE NECESSARY FOR THIS PROCEDURE. ELECTRONIC CLAIM USERS SHOULD RESUBMIT ELECTRONICALLY WITH THE REQUIRED TOOTH NUMBER AND/OR SURFACE. FOR PAPER SUBMISSIONS, PLEASE RETURN A COPY OF THIS EOB WITH THE REQUIRED TOOTH NUMBER AND/OR SURFACE.

Reading your Explanation of Benefits (EOB)

altus dental
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P.O. Box 1557
Providence, RI 02901-1557

[REDACTED]

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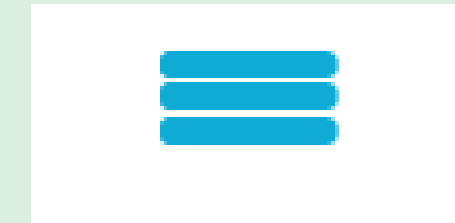
DATE OF ISSUE 1/31/2021
 PATIENT [REDACTED]
 DATE OF BIRTH [REDACTED]
 GROUP NO. [REDACTED]
 GROUP NAME [REDACTED]
 DENTIST [REDACTED]
 CLAIM DOCUMENT NO. [REDACTED] - 000
 SUBSCRIBER I.D. [REDACTED]

Payment for these services is determined in accordance with the specific terms of your dental plan or with the terms of applicable agreements with network dentists.

TOOTH NO. OR LETTER	DATE OF SERVICE	PROCEDURE NUMBER AND DESCRIPTION	DENTIST'S CHARGE	ALLOWABLE CHARGE	DEDUCTIBLE	% CO-INSURANCE	BALANCE	PLAN PAYMENT	PROCESSING POLICIES
1	07/14/2020	7240 REMOVAL OF IMPACTED TOOTH-FULL BONY	450.00	325.00	25.00	80	85.00	240.00	
16	07/14/2020	7240 REMOVAL OF IMPACTED TOOTH-FULL BONY	450.00	325.00	0.00	80	65.00	260.00	
17	07/14/2020	7240 REMOVAL OF IMPACTED TOOTH-FULL BONY	450.00	325.00	0.00	80	65.00	260.00	
32	07/14/2020	7240 REMOVAL OF IMPACTED TOOTH-FULL BONY	450.00	325.00	0.00	80	65.00	260.00	
	07/14/2020	9222 GENERAL ANESTHESIA- FIRST 15 MINUTES	300.00	92.00	0.00	80	18.40	73.60	
	07/14/2020	9223 GENERAL ANESTHESIA- EACH ADD'L 15 MIN.	200.00	92.00	0.00	80	18.40	73.60	
	07/14/2020	9223 GENERAL ANESTHESIA- EACH ADD'L 15 MIN.	200.00	92.00	0.00	80	18.40	73.60	

Registering will help you track your claims and view your Estimation of Benefits

Wellfleet: go to <https://www.studentinsurance.com/Client/941> and look for then click on "My Account-Graduate" and then "Create a New Account"



Altus: go to altusdental.com then click on First-time user of our new site? Click here to register.

www.altusdental.com

About Altus Dental | Contact Us

altus dental

Home Members Dentists Employers Brokers Healthy Smiles Individuals & Families Altus Vision

Members Online Registration

1. Enter Name & ID

2. Registration Form

3. Confirmation

Members Online Registration

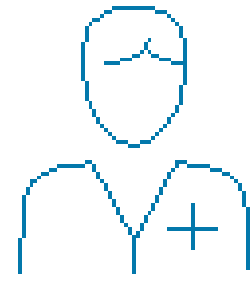
To protect your personal health information, you must register for our online services. It's simple - just fill in the fields below.

To continue, please enter your name and identification (ID) Number:

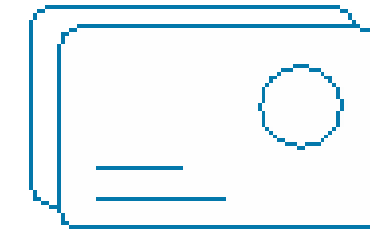
First Name: Last Name:

Altus registration allows you to easily manage your benefits

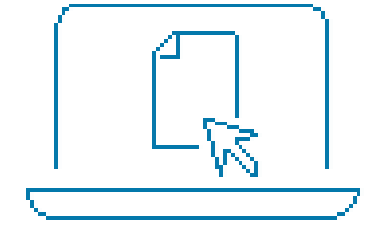
When you register for an online account, you can:



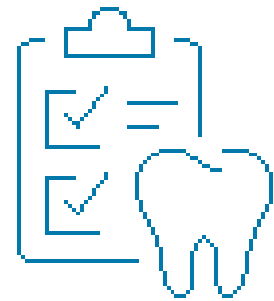
See if your current dentist is in network or find a new dentist with our *Find a Dentist* search



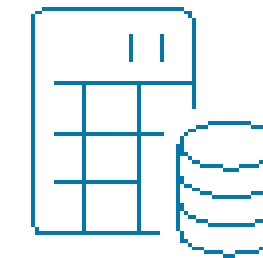
Order or print a new ID card



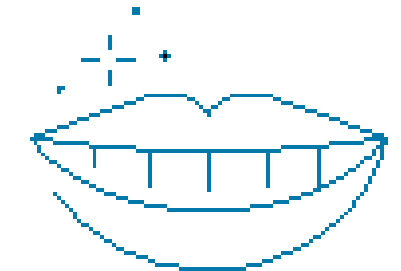
Get paperless explanations of benefit and pre-treatment estimates



Check your eligibility for services and procedures



View your deductible and maximum amounts, and confirm remaining balances



Get oral health care tips with *Healthy Smiles for Life*

Registering is fast, easy and secure.

All you need is your Altus Dental ID number. Visit altusdental.com today and select “Click here to register” or log in with your username and password. We use two-factor authentication for an extra layer of security. We’ll send a security code by email or text when you log in. Enter the code to access your account.

altus
dental™



Let's Review the Highlights

- *Determine whether teeth are impacted and choose a dentist accordingly*
- *Ask dental office to submit your claims 1st to health plan, 2nd to dental plan*
 - *Provide info for both plans*
- *Ask questions & call if you need help*

Your plan details!



Health Plan

Group #: ST0941SH

Claim Administrator: Wellfleet Group

www.wellfleetstudent.com

Customer Service: (877) 657-5027

Network: Cigna PPO

Find a provider:

<https://hcpdirectory.cigna.com/>

Dental Plan

Group #: 3001-0002

Member ID: unique ID is on your dashboard at hwtrust.geouaw.org

Customer Service: (877) 223-0588

Network: Connection Dental and DenteMax Networks

Find a provider: www.altusdental.com

