

ALPINE EDUCATION ASSOCIATION / ALPINE UNISERV DENTAL

A.E.A. / Alpine UniServ sponsors the dental program for the Alpine School District

We have two dental companies that you can choose from. It does not make a difference if you are a teacher, administrator or what your job title may be, you can choose from either one of these companies.





Key points to keep in mind when picking a plan. If you already have a dentist which you want to keep, you will want to pick a plan that your dentist will accept. Make sure your dentist is in the network you pick. Your dentist may accept an EMI plan but not a TDA plan, or your dentist may accept a TDA Plan but not an EMI plan, once you know this, it could help narrow your search down. EMI offers three different plans you can choose from, TDA offers four different plans you can choose from. NOTE within each company these plans have different networks, so you do not want to call your dentist and say do you accept EMI/TDA they may say yes because they accept one of their plans but not all of them. You would want to be more specific and say do you accept EMI Advantage Network, or EMI Premiere Network if calling on an EMI plan. You would want to say for TDA do you accept the TDA PPO Network or the TDA DHMO Network if calling on a TDA plan. If you do not have a dentist and need to pick one, I suggest you first pick your dental plan by comparing all 7 plans, three with EMI and four with TDA, then pick the plan that best fits your needs. Everyone's needs are different. I always get asked, which is the best plan for me. The answer I give is, it is different for everyone. Only you know your individual or family needs, so it is up to you to do the math and pick the best plan for you. One suggestion I have is if you have not had dental insurance for the past 4 months and you anticipate you will need a lot of work done; I would not pick a plan with a waiting period. All the plans are good but there will be one that will best meet your needs.

PLEASE MAKE SURE IF YOU CANCEL AN EMI PLAN AND GO TO A TDA PLAN, OR VISE A VERSA THAT YOU FILL OUT BOTH AN EMI FORM AND A TDA FORM. ONE TO CANCEL AND ONE TO ADD!

Here is a link to our A.E.A./Alpine UniServ Dental website, where you can find comparison sheets, enrollment forms, provider search and much more for both EMI and TDA Dental Plans.

- A.E.A / Alpine UniServ Dental Page
- MAKE SUREYOU READ THE DENTAL FLYER FOR INSTRUCTIONS

• If you go to the next two slides you will be able to click on a more descriptive breakdown of plans, slide number 5 will be going over EMI dental plans and slide number 6 will be going over TDA dental plans.

DENTAL INSURANCE 2021-2022

SPONSORED BY ALPINE EDUCATION ASSOCIATION

Alpine Education Association sponsors seven dental plans. They are available to all employees during the Annual Open Enrollment. Open enrollment is a time for employees to make changes to their Dental Insurance plan without a qualifying event. IF YOU ARE A NEW HIRE OR HAVE A QUALIFYING EVENT, SUCH AS BIRTH, MARRIAGE, DEATH, YOU HAVE 30 DAYS FROM DATE OF THE EVENT TO GET YOUR FORM IN. OPEN ENROLLMENT IS AUGUST 2ND - 16TH, 2021. BENEFITS FAIR IS AUGUST 16TH - 20TH, 2021 AT THE PDC. We will also be at the PDC on the last day 8-16-2021.

If you currently have dental insurance, and you do not want to make changes, you <u>DO NOT</u> need to fill out a new form. If you want to change from TDA to EMI or visa-versa, <u>YOU WILL NEED TO CANCEL</u> THE PLAN YOU DO NOT WANT AND FILL OUT A NEW FORM FOR THE NEW PLAN. Otherwise, you will be charged for dual insurances. It is your responsibility to check your pay stubs to watch for errors. Enrolling in a new dental plan will not automatically cancel the other coverage.

Choose a plan from the summary below, that meets your needs and complete the enrollment form.

Attached is detailed information on each plan, or they can also be found at http://alpineuniserv.org.

Premiums will be deducted monthly at the end of every month for that month. For enrollment guestions, please call Annie Council at 801-224-2056 ext. 2. For claims or coverage questions, please call the dental provider directly at the numbers listed below. NOTE if you sign up for Medical, you are not signing up for dental.

Dental is ONLY DONE BY THE ATTACHED FORMS & TURNED INTO AEA, in Pleasant Grove Office!

| Company | Monthly Rate Employee only | Monthly Rate Two-Party | Monthly Rate Family | Telephone |
|-------------------------------------|-------------------------------|---------------------------|------------------------|----------------|
| EMI Health (D5) PPO | 33.40 | 76.70 | 132.70 | 1-800-662-5851 |
| EMI Health (D2) EOP | 23.30 | 64.10 | 84.40 | 1-800-662-5851 |
| EMIA Health (D3) PPO | 17.10 | 34.40 | 56.90 | 1-800-662-5851 |
| TDA Companion | 39.14 | 84.12 | 138.72 | 1-800-880-3536 |
| TDA PPO/MAC | 34.76 | 78.36 | 132.27 | 1-800-880-3536 |
| TDA Elite Choice | 27.88 | 58.08 | 95.89 | 1-800-880-3536 |
| TDA Peak Care Plus Formally DHMO | 13.48 | 27.99 | 43.89 | 1-800-880-3536 |

PLEASE DO NOT SEND ENROLLMENT FORMS TO THE DENTAL COMPANY OR THE DISTRICT OFFICE

N. E. CE. CELIS THE DISTRICT OFFIC

PLEASE SEND THEM TO:

Alpine Education Association: Att. Annie

557 West Center Street

Pl. Grove, UT 84062

annie@alpineuniserv.org

EMI DENTAL PLAN COMPARISON SHEET

PLAN YEAR SEPT 2021-2022



CONTACT INFORMATION

ANNIE COUNCIL 801-224-2055 801-224-6137 (fax) annie@alpineuniserv.org

| D 5 - Choice Plan Premiere and Advantage Dentists | | | | |
|--|--|---------------|--|--|
| | In-Network Out-Of-Network | | | |
| Type I Preventative | 100% | 80% (Premier) | | |
| Type II Basic | 80% | 60% (Premier) | | |
| Type III Major | 50% | 50% (Premier) | | |
| Type IV Orthodontics | 25% Discount | None | | |
| Annual Madmum | \$1,200.00 | | | |
| Specialists | Same as General Dentist | | | |
| Endodontics Periodontics | Type III - Major | | | |
| Deductible | \$100 Lifetime Per Person \$300 Per Family | | | |
| Waiting Periods on Type III | 12 Month; However weived if first chance to sign up or if transfering from D2,D3 or TDA. | | | |
| Employee | \$33.40 monthly rate | | | |
| 2 Party | \$76.70 monthly rate | | | |
| Family | \$132.70 monthly rate | | | |

| D 2 - Advantage Co-Pay Plan Advantage Dentists | | |
|---|-------------------------|--|
| | In-Network Only | |
| Type I Preventative | 100% | |
| Type II Basic | Based Upon Fee schedule | |
| Type III Major | Based Upon Fee schedule | |
| Type IV Orthodontics | 25% Discount | |
| Annual Maximum | Unlimited | |
| Specialists | 20% Discount | |
| Endedontics Periodontics | Besed Upon Fee schedule | |
| Deductible | None | |
| Watting Periods | None | |
| Employee | \$23.30 monthly rate | |
| 2 Party | \$54.10 monthly rate | |
| Family | \$84.40 monthly rate | |

| D 3 Premiere PPO (100) Premiere Dentists In-Network Only | | |
|--|-------------------------------------|--|
| Type I Preventative | 100% | |
| Type II Basic | See Member Schedule (Discount Only) | |
| Type III Major | See Member Schedule (Discount Only) | |
| Type IV Orthodontics | 25% Discount | |
| Annual Waximum | Unlimited | |
| Specialists | Same as General Dentist | |
| Endodoritica Periodoritica | See Member Schedule (Discount Only) | |
| Deductible | None | |
| Walting Periods | None | |
| Employee | \$17.10 monthly rate | |
| 2 Party | \$34.40 monthly rate | |
| Family | \$56.90 monthly rate | |

| 2021 COPAY FEE EXAMPLES - In-Network (subject to change January 1st of each year) | | | | |
|---|------------------|----------|---------------------|--|
| 2331 | Porcelain filing | Type II | 2 surface anterior | |
| 2394 | Porceiain filing | Type II | 4 surface posterior | |
| 4210 | Ginglyectorry | Туре III | (periodontics) | |
| 3330 | Moler | Туре III | Root Canal | |
| 2750 | Porcelain Crown | Type III | | |
| 0120 | Office Visit | Type I | | |

| 2021 COPAY FEE EXAMPLES In-Network (subject to change January 1st of ea. Yr.) (Specialists are 20% Discount only) | | | | |
|---|-------------------|-------|---------------------|--|
| 2331 | Porcelain filling | \$46 | 2 surface anterior | |
| 2394 | Porcelain filling | \$80 | 4 surface posterior | |
| 4210 | Gingivectomy | \$238 | (periodontics) | |
| 3330 | Moter | \$345 | Root Canal | |
| 2750 | Porcelain Crown | \$355 | | |
| 0120 | Office Visit | \$25 | | |

| 2 | 2021 COPAY FEE EXAMPLES In-Network (subject to change January 1st of each year) | | | | |
|------|--|---------------------------|--|--|--|
| 2331 | Porcelain filling | \$85 2 surface enterior | | | |
| 2394 | Porcelain filling | \$138 4 surface posterior | | | |
| 4210 | Ginglivectomy | \$260 periodontics) | | | |
| 3330 | Moler | \$525 pot Canal | | | |
| 2750 | Porcelain Crown | \$655 | | | |
| 0120 | Office Visit | \$0 | | | |

TDA DENTAL PLAN COMPARISON SHEET



Alpine School District 2021-2022 School Year

Contact Information Annie Council 801-224-2055 801-224-6137 (fax) nnie@alpineuniserv.org

| | A Peak Care Plus rovider Network) |
|-----------------|--------------------------------------|
| | In-Network |
| Class 1 | 100% after \$10 Copay |
| Preventative | |
| Class 2 | Based on Fee Schedule |
| Basic | |
| Class 3 | Based on Fee Schedule |
| Major | |
| Class 4 | 15% - 25% Discount |
| Orthodontics | |
| Annual Maximum | Unlimited |
| Specialists | Specialty Care |
| Endodontics | Based on Fee Schedule |
| Periodontics | Based on Fee Schedule |
| Deductible | None |
| Waiting Periods | None |
| Employee | \$13.48 (monthly rate) |
| 2 Party | \$27.99 (monthly rate) |
| Family | \$43.89 (monthly rate) |

| TDA Elite Choice | | | | |
|---------------------------|-------------------------|--------------|--|--|
| (PPO Provider Network) | | | | |
| In-Network Out-of-Network | | | | |
| Class 1 | 100% after | Based on Fee | | |
| Preventative | \$15 Copay | Schedule | | |
| Class 2 | Based on Fee | Schedule | | |
| Basic | | | | |
| Class 3 | Based on Fee | Schedule | | |
| Major | l . | | | |
| Class 4 | 15% - 25% Discount | | | |
| Orthodontics | l . | | | |
| Annual Maximum | \$5,000.00 | | | |
| Specialists | Same as General Dentist | | | |
| Endodontics | Based on Fee Schedule | | | |
| Periodontics | Based on Fee Schedule | | | |
| Deductible | None | | | |
| Waiting Periods | None | | | |
| Employee | \$27.88 (monthly rate) | | | |
| 2 Party | \$58.08 (monthly rate) | | | |
| Family | \$95.89 (monthly rate) | | | |
| | | | | |

| wider Network) | | | |
|----------------------------|--|--|--|
| | | | |
| In-Network | Out-of-Network | | |
| 100% | 90% MAC** | | |
| | | | |
| 80% | 70% MAC** | | |
| <u> </u> | | | |
| 50% | 40% MAC** | | |
| <u> </u> | | | |
| 50% | 50% MAC** | | |
| <u> </u> | | | |
| \$1,200.00 | | | |
| \$1,000.00 up to age 19 | | | |
| C | Class 3 | | |
| C | lass 3 | | |
| \$50.00 PP/\$150.00 Family | | | |
| 12 months*** | | | |
| \$34.76 (monthly rate) | | | |
| \$78.36 (monthly rate) | | | |
| \$132.27 (monthy rate) | | | |
| | \$0% 50% 50% \$1,000.00 up \$1,000.00 up \$2,000 PP/\$1.5 \$2,000 PP/\$1.5 \$34.76 (mon \$78.36 (mon | | |

| TDA Companion (PPO Provider Network) | | | | |
|--------------------------------------|-------------------------------|-------------------------|--|--|
| | In-Network | Out-of-Network | | |
| Class 1 | 100% | 100% MPR* | | |
| Preventative | | | | |
| Class 2 | 80% | 80% MPR* | | |
| Basic | | l . | | |
| Class 3 | 50% | 50% MPR* | | |
| Major | 1 | l . | | |
| Class 4 | 50% | 50% MPR* | | |
| Orthodontics | | | | |
| Annual Maximum | \$1,000.00 | | | |
| Ortho Lifetime Max | \$1,000.00 up t | \$1,000.00 up to age 19 | | |
| Endodontics | Clar | ss 3 | | |
| Periodontics | Clar | ss 3 | | |
| Deductible | \$100.00 Lifetime | /Person | | |
| Waiting Periods | 12 month | 12 months*** | | |
| Employee | \$39.14 (monthly rate) | | | |
| 2 Party | \$84.12 (monthly rate) | | | |
| Family | amily \$138.72 (monthly rate) | | | |
| 202012022 Colorovana Security | | | | |

| 2021-2022 Copay Examples | | |
|--------------------------|-----------------------------|---------|
| ADA Code | Description | Copay |
| D2331 | Resin Filling - Two Surface | \$52 |
| | Anterior | |
| D2394 | Resin Filling - 4 surface | \$108 |
| | Posterior | |
| D7240 | Complete Borry Impaction | \$135 |
| | | |
| D4210 | Gingivectomy | \$200 |
| | | |
| D3330 | Molar Root Canal | \$395 |
| | | |
| D2750 | Porcelain Crown | \$325 + |
| | | Lab Fee |
| D9430 | Office Visit | \$0 |
| | | |
| | | |

| ADA Code | Description | Copay |
|----------|-----------------------------|-------|
| D2331 | Resin Filling - Two Surface | \$40 |
| | Anterior | |
| D2394 | Resin Filling - 4 surface | \$95 |
| | Posterior | |
| D7240 | Complete Bony Impaction | \$125 |
| D4210 | Gingivectomy | \$175 |
| D3330 | Molar Root Canal | \$323 |
| D2750 | Porcelain Crown | \$365 |
| D9430 | Office Visit | \$15 |

| 2021-2022 Coinsurance Examples | | |
|--------------------------------|-----------------------------|---------|
| ADA Code | Description | Class |
| D2331 | Resin Filling - Two Surface | Class 2 |
| | Anterior | |
| D2394 | Resin Filling - 4 surface | Class 2 |
| | Posterior | |
| D7240 | Complete Bony Impaction | Class 2 |
| | | |
| D4210 | Gingivectomy | Class 3 |
| | | |
| D3330 | Molar Root Canal | Class 3 |
| | | |
| D2750 | Porcelain Crown | Class 3 |
| | | |
| D9430 | Office Visit | Class 1 |
| | | |
| PLAN INCLUDED ON ALL PLANS | | |

| 202012022 Coinsurance Examples | | |
|--------------------------------|-----------------------------|---------|
| ADA Code | Description | Copay |
| D2331 | Resin Filling - Two Surface | Class 2 |
| | Anterior | |
| D2394 | Resin Filling - 4 surface | Class 2 |
| | Posterior | |
| D7240 | Complete Bony Impaction | Class 3 |
| | | |
| D4210 | Gingivectomy | Class 3 |
| | | |
| D3330 | Molar Root Canal | Class 3 |
| | | l . |
| D2750 | Porcelain Crown | Class 3 |
| | | l . |
| D9430 | Office Visit | Class 1 |
| | | |

*MPR (Maximum Plan Reimbursement)

**MAC (Maximum Allowable Charge)
***Walting period is waived with prior coverage, switching from EMI Health to TDA or switching between TDA plans

If at any time you need to reach out to A.E.A. / Alpine UniServ Dental Office, you can call Annie Council at 801-224-2055 ext. 2 or email annie@alpineuniserv.org. Our office is in Pleasant Grove, UT. ALL FORMS MUST COME TO OUR OFFICE

A.E.A. / Alpine UniServ

557 W. Center Street

Pleasant Grove, UT 84062

Fax 801-224-6137

- EMI Phone number for questions: I-800-662-5851 PLEASE WATCH THE EMIVIDEO IN THIS ROOM
- TDA Phone number for questions: I-800-880-3536- PLEASE WATCH THE TDA VIDEO IN THIS ROOM

Most common questions and answers

| Question: | What plan should I choose? |
|-----------|---|
| Answer: | Please do your research every plan is good, it just depends on your needs. |
| | Remember to look at co-pays, annual maximum, deductible and waiting periods if you |
| | have not been on dental insurance. |
| | |
| Question: | When will I receive my cards? |
| Answer: | New dental applicant will receive their cards two weeks after the dental company has |
| | received their app. |
| | |
| Question: | On the bottom of the EMI Dental form it says Employer sign off, who is that? |
| Answer: | It is our office at Alpine UniServ. |
| | |
| Question: | How do I cancel my Dental and when can I? |
| Answer: | At open enrollment you can cancel or if you have a qualifying event. To cancel you just |
| | fill out an enrollment form and check the box cancel. |
| Question: | I have a question on a dental claim, can you help me? |
| Answer: | Please call TDA if you are with TDA at 1-800-880-3536. |
| 711344611 | Please call EMI if you are with EMI Dental at 1-800-662-5851 |
| | riedse can civil i you are with civil bentarde 1 000 ook 3031 |
| Question: | When will my dental plan go into effect? (If at Open Enrollment) |
| Answer: | It will be effective September 1. |
| | |
| Question: | Can I change my plan later or drop my plan later if I do not like it? |
| Answer: | Unless the patron has a qualifying event the only time they are able to add/drop/change |
| | is during open enrollment. |
| | |
| Question: | How long after a qualifying event do I have to change/add/drop? |
| Answer: | The paperwork must be turned in within 30 days of the qualifying event. |
| | |

The most common qualifying events are marriage/divorce /birth/death/loss of coverage from spouse. **Please note that if a dentist drops mid-year this is not a qualifying event. The patron will need to select a new dentist until their open enrollment, at

TDA: 1 800-880-3536 EMI: 1 800-662-5851

What is a qualifying event?

which point they can change plans.

Question:

Answer: