

Leon County School District

Frequently Asked Questions



Introduction

The Standard is very excited to welcome Leon County School District as a Dental Insurance client effective October 1, 2022. There are three plans, High, Medium, and Low. The Low and Medium plans are intended to be chosen by employees whose dentists are in network. The High plan has been enhanced to allow employees to see any dentist they want by paying the same level of coinsurance in and out of network. If the dentist is out of network, The High plan pays at 95% of the Usual Customary and Reasonable charge (95th UCR). If the out of network dentist charges at or below what 95% of dentists charge in your area, we will allow the full charge. If the dentist charges more than what 95% of dentists charge in your area, the member pays the difference.

What network does The Standard use?

The Standard uses the Ameritas network. Most dentists in Tallahassee know the Standard due to our book of business in your area. If your dentist says they "do not take Standard," please remind them that The Standard uses the Ameritas network.

How do I find a provider or confirm my provider is in network?

Please check our website by visiting: <http://www.standard.com/services> and click on "Find a Dentist." **Your provider network is: Classic (PPO) & Plus Network.**

What Plan Should I Choose if my Dentist is not in network?

If your dentist is not in network, we recommend the High Plan. The high plan allows you to see any dentist you want to see and if the dentist is not in network, the plan will pay at 95th UCR.

Pretreatment – How will I know what is covered?

While we do not require a pretreatment authorization form for any procedure, we recommend them for any dental work you consider expensive. As a smart consumer, it is best for you to know your share of the cost up front. Simply ask your dentist to submit the information for a pretreatment estimate to our customer relations department. We will inform both you and your dentist of the exact amount your insurance will cover and the amount that you will be responsible for. That way, there will not be any surprises once the work has been completed. Most people request a Pretreatment for anything over \$200

Open Enrollment

If a member does not elect to participate when initially eligible, the member may elect to participate at the policyholder's next enrollment period. This enrollment period will be held each year and those who elect to participate in this policy at that time will have their insurance become effective on October 1. You may choose to move to one of the other dental plans offered during Open Enrollment each year.

How does my Calendar Year Maximum Work?

Your annual dental maximum will refresh each year on January 1st. Your deductible will refresh with your annual maximum each year. Preventive Services do count toward your dental annual maximum

Your Plan includes Max BuilderSM

Max Builder allows you to earn additional annual maximum to use when you've exhausted your annual dental maximum. The Max Builder Maximum is help separately from your annual maximum. You only use up what you need of any accumulated Max Builder maximum, the rest remains available to you when you need it.

How do I earn Max BuilderSM

Earning Max Builder benefits is easy: A participant must submit at least one claim during the benefit year while staying at or under the plan-specific threshold amount. Earns an extra reward, called the PPO Bonus, by seeing a Network Provider. Employees and their covered dependents may accumulate rewards up to the stated maximum carry-over amount, then use those rewards for any covered dental procedures subject to applicable coinsurance and plan provisions. If a plan participant doesn't submit a dental claim during a benefit year, all accumulated rewards will be lost; but he or she can begin earning rewards again the very next year.

Are Braces Covered?

Yes, Orthodontia is covered under the High and Middle plans for ALL enrolled plan members, even adults! Each member has a separate lifetime maximum of \$1,000 for braces. This also includes most tooth aligners, like Invisalign!

Orthodontia coverage is paid out quarterly over the course of your treatment (or 2 years, whichever is less).

Already have Braces?

If you are a new enrollee and already have braces in place, they will not be covered.

Prior Extraction Limitation

Your policy has a prior extraction limitation, also known as the "missing tooth clause". This means that if you had a tooth extracted prior to enrolling in your plan with The Standard, we may or may not pay for any benefits towards replacing that tooth. If a member has an existing tooth replacement (i.e. a bridge or denture), this limitation does not apply. The member is eligible for replacement after the appliance is 5 years old.

When will I have access to The Standard member website?

Once your coverage is active, you will have access to your benefits in the **Member Portal** at www.standard.com/dental. Click on "Log in for Benefits". At this site, you can: check the status of your claim, see your remaining benefits, get a plan summary, print an ID card and nominate a dental provider to the Ameritas network.

How do I submit a claim if my dentist does not file for me?

If you visit an In-Network provider, the dentist will file your claim for you. If you go out of network, your provider may file on your behalf, or they may require you to pay upfront and file it yourself.

To file yourself. Go to: www.standard.com/dental and click: "find a form" to download a claims form. You may also submit the dentist's 'Universal Claim Form' to the address on your ID card. We will reimburse you directly.

If you are filing yourself, do not delay. Your policy requires all claims be received by The Standard within 90 days of the date of service.

Is Periodontal Maintenance covered?

Yes. Two Periodontal Maintenance visits are covered, in lieu of your regular cleaning, if the member has had prior Periodontal Therapy. If this therapy was completed before your coverage was in effect with The Standard, your dentist must submit the date of the Periodontal Therapy and supporting documents.

Are white fillings covered on all teeth?

Yes. Resin (tooth colored) fillings are allowed on all teeth. We do not down-grade them on molars, which may happen with other plans.

Is Wisdom Tooth Extraction covered?

Yes. We cover wisdom tooth extraction the same way we cover any other tooth extraction.