What are Ancillary Benefits?

- ➤ Ancillary benefits are known as a secondary layer of coverage that is utilized to supplement group health insurance.
- > Reduce expenses from healthcare expenses
- ➤ An affordable alternative for employers and employees

Dental Anchillary Benefits

- ➤ Most health insurance plans do not include dental dental coverage can be purchased as a supplement or stand-alone (either through Marketplace or through employer group dental plan)
 - However, all California marketplace plans automatically include pediatric dental for children up to 18 (required by ACA)
- > Types of Dental Coverage
 - DMO (Dental Maintenance Organization)
 - Similar to HMO
 - receive services from a primary dental physician, who would coordinate your dental care and refer you to specialists
 - Premiums are lower
 - No deductibles or yearly dollar limits.
 - No referral is needed for orthodontists.
 - PPO (Preferred Provider Organization) or PDN (Participating Dental Network)
 - the patient chooses the dentist they want and the dental coverage follows them
 - can choose any licensed dentist; they don't have to be in our network
 - If you visit a network dentist, your rates will be lower
 - Have higher premiums
 - There are deductibles and yearly dollar limits
 - No referral is needed for specialists
- Common Dental Insurance Tiers
 - o Dental services are classified in three classes of service:
 - Class 1: Preventative and diagnostic care
 - For example: x-rays and cleanings
 - Class 2: Basic restorative care
 - For example: fillings and root canals
 - Class 3: Major restorative care
 - For example: dentures, bridges, and crowns
- > Benefits of Dental Insurance
 - This helps promotes good oral hygiene habits
 - Helps avoid and lower the risk of gum diseases
 - Helps detect dental problems early which can help reduce the cost of treatment that may be needed in the future
 - Helps reduce dentally risks that are related to chronic mental conditions
- > Important Terms
 - o Deductible

- most likely would have to be paid before any of the benefits are paid under the plan
 - Preventative and diagnostic services do not apply to this rule
 - Cleanings and checkups do not apply to this rule
- Coinsurance
 - If your plan's dental benefits plan does not cover 100% of the cost of a service, you are responsible for paying the remaining amount of the money to your dentist
 - Coinsurance tends to be a percentage
 - Common plans that include preventative care, fillings, crowns, root canals, non-surgical extractions, and gum disease deep cleaning are all covered by anywhere from about 50–100%
 - In many cases, one must pay your coinsurance on top of your deductible
- Annual Maximums
 - The total amount one's dental plan will pay toward your care within a 12-month period
 - The range is usually between \$1,000 and \$2,000
 - Deductible does not apply to the annual maximum.
 - Copays that are part of the plan do not apply to the annual maximum
- Orthodontics and implantology are quite expensive and only have a once-in-a-lifetime maximum
 - Special maximums, coinsurance, and lifetime benefits limits
 - Only cover about 50% and have a lifetime maximum of \$2,000

Audio Anchillary Benefits

- Hearing Benefits
 - Reactive benefits can only be utilized once a person senses that they may have a hearing impairment
 - Hearing benefits are more costly to the plan sponsor
 - This coverage is less common
 - Have partial coverage for hearing exams and hearing aids
 - Subject to deductions
 - Subject to coinsurance
 - Have an annual maximum amount of benefits that will be paid
 - Hearing benefits may replacements of hearing aids once every three years
- ➤ 24 states in the United States have a mandatory hearing benefit that has to be offered by employers and plan sponsors
 - Require their state to pay for hearing aids for children
 - Colorado, Delaware, Georgia, Kentucky, Louisiana, Maine, Maryland, Massachusetts, Minnesota, Missouri, Montana, New Jersey, New Mexico, North Carolina, Oklahoma, Oregon, Tennessee, Texas, and Vermont
 - Require their state to pay for hearing aids for children and adults
 - Arkansas, Connecticut, Illinois, New Hampshire, and Rhode Island
 - Require their state to pay for hearing aids and cochlear implants for children
 - Wisconsin

Sources

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