Information regarding Delta Dental PPO vs. UHC PPO

The Delta PPO network and the UHC PPO network are nearly identical in size. Clarification is needed for those currently using a Delta Premier Provider; Delta Premier Providers are not equivalent to Delta IN Network providers. If employees see a UHC out of network provider, they will be seeing benefits paid as if they were seeing a Delta Premier provider and the payout will be very similar. Further explanation is provided below.

UHC has only (2) types of providers:
- “INN” - Contracted with UHC PPO network
- “OON” - Not contracted with UHC PPO network

INN Providers
UHC has agreed to a fee schedule with the DDS and the DDS accepts that UHC reimbursement, plus the patient’s co-insurance responsibility, as payment in full for services rendered. A member will not be “balance billed” if they see an INN dentist (they are responsible for their portion of co-insurance according to the plan).

OON Providers
Since UHC has no contractual agreement with dentists outside of our network we reimburse a dentist based on the usual and customary fees (UCR) for the geographic area where the dentist is practicing. UHC receives UCR data from Fairhealth every 6 months and OON providers are being paid fairly based on the prevailing charges in their area. UHC uses FairHealth for this because they collect data from multiple carriers and are the most accurate.

Example of how UCR is determined. 100 dentists in the area all have submitted claims for an amalgam filling to various dental carriers. That data is aggregated by a carrier or 3rd party and ranked from highest charge (100th percentile) to lowest (1st percentile). UHC is reimbursing for a filling at whatever charge would be #90 on that list. Only 10% of charges in the area will be higher than what we are reimbursing to the dentist. There is a chance a patient could be balance billed by an OON DDS, since the plan is set to pay at the 90th percentile of UCR for the area; 90% of the time the dentist will accept our reimbursement (plus patient’s co-insurance) as payment in full for services rendered.

Additional UHC Benefits/Value
One innovative program UHC offers for the PPO plan is Consumer Max Multiplier Roll over benefits. Each member has the opportunity to roll over portions of their unused benefits for use in subsequent years. Over time, members can accumulate up to $2,000 in their roll over account that can be added to their $2,000 annual max resulting in a $4K max that can be very useful in years in which claims are higher. Members are required to visit their dentist at least once per year in order to be eligible as well as utilizing less than 50% of their annual maximum (extremely common). UHC keeps records of the roll over amounts in accounts and applies to claims accordingly.