

Commonly Asked Questions

the most commonly asked questions are listed below, numerically in no particular order.

- 1. Who is covered under this plan?** *You and all enrolled dependents, as per Article III, 3.02. Enrollment is done in the spring of each year, unless you are hired mid-year.*
- 2. Are my step children covered?** *Yes, your step children are covered until age 26, with no stipulations.*
- 3. I am Job Sharing. Can I still be covered by this plan?** *Yes, but you are responsible for the half of the premium that the District does not pay. If you haven't been notified by DCUE Dental, you must notify us to receive a payment booklet. **(Do not put August and September payments on the same check as they apply to different program years.)***
- 4. I work part-time. Am I eligible for dental coverage?** *Those working less than .75 FTE are not eligible **unless** they are in a job-share situation as provided in Question No. 3.*
- 5. I am a long-term substitute. Am I eligible for dental coverage?** *If you were hired to work from the first day of school to the last day of school (and every day in between), yes, you should have been offered coverage at the District office. If you are working a six-week assignment or October to May, for example, no you do not receive coverage.*
- 6. My spouse and I are both employed by the District under the teacher's collective bargaining agreement. Are we both covered?** *Yes, the new Enrollment Form offers space for Employee #1 and Employee #2. You must complete a form with both names and birthdates, etc. on it to get double coverage. One form for both employees is adequate.*
- 7. My child is under age 26, and is getting married. Is s/he still covered?** *Yes, your child can be covered until age 26, even if s/he is married. Be sure to notify DCUE Dental of any name changes.*
- 8. My employment is terminating, either voluntarily or involuntarily. Can I still keep my coverage?** *Yes. Once the DCUE dental office has been notified by the District office, you will receive a letter from the DCUE Dental office offering you continuation of coverage, and offering the option of COBRA coverage for 18 months (your spouse or dependent could be eligible for up to 36 months of coverage depending upon the nature of the COBRA qualifying event), as long as you make the monthly premium payments. (See Continuation of Coverage letters in Appendix B – Forms.)*
- 9. What kind of plan do I tell my dentist I have? Do we have a group number?** *You are covered under a Direct Reimbursement Dental Fund provided by Dakota County United Educators, the union representing you. There is no group number to list. The dentist DOES NOT file the claim. You pay the bill and then file the claim with all proper supporting documentation needed.*
- 10. What do I need to file the claim correctly the first time?** *a) a Claim Form with Section 1-3 completed, signed, and dated by you, b) a statement or ledger itemizing the date(s) of treatment, the patient, the treatment performed, charges, discounts and payments made by you, and c) if applicable, and EOB from your primary insurance. Be sure to provide a completed claim form for each date of treatment and each patient. (See Appendix A, Section 2.0 Samples of Attachments.)*
- 11. Where do I get the Claim Forms?** *The original DCUE Dental Claim Forms are available at the DCUE office and on the dcue.org website under the Dental tab. Claim forms may be available in your school's main office.*
- 12. How does coverage work for implants/orthodontics and/or large expense procedures?** *These treatments are treated like all other dental treatments within the program year; however, **claims for monthly payments** may be carried over the period of treatment or payment plan (i.e. from year to year). Be aware that there is an individual lifetime cap of \$2000 in benefits for orthodontics. Call to discuss your specific situation.*
- 13. My child goes to college in another city/state. Does s/he need to come back to go to the dentist/orthodontist?** *No, your child may use a dentist near his/her school. You need to complete the necessary fields on the Claim Form(s). The student, or you, will have to pay the bill in order to file the claim. After receiving the itemized statement showing payment, the Claim Form and documentation can be sent to the DCUE Dental office.*

14. **I just had a baby. When can I put him/her on the plan?** Any time before your child is ready to make his/her first visit to the dentist. Add them to next plan year's enrollment or call our office to provide child's full name and DOB.
15. **Can I use my Flexible Spending Account for dental costs? If so, how does that work?** If you enrolled in the Flexible Spending Reimbursement Program provided by the District during the open enrollment period, you can use it for any expenses not covered by DCUE Dental or any other coverage. After you are reimbursed for your expenses through DCUE Dental, use the amount claimed minus the amount paid by DCUE Dental to calculate your out-of-pocket expenses. Send a copy of your Explanation of Benefits from DCUE Dental, which you receive with your check, along with a completed Flex Spending Form, to the address provided. The District office has more information on the Flexible Spending Plan and how to enroll in it.
16. **My dentist gave me a prescription for an antibiotic because of an infection in my gums. Will I be reimbursed for it?** DCUE does not reimburse for prescriptions. You may be able to have it covered under your medical plan. Call your medical insurance customer service office for more information.
17. **Do I need to enroll every year?** Yes, you and any dependents you want covered under the plan need to be listed on the latest enrollment form. Enrollment is now done through our website, online at www.dcue.org. Click on the Dental Tab then Dental Members to access the site for enrolling.
18. **Can I be enrolled in DCUE Dental if my spouse and/or I have other dental insurance?** Yes, if you are a District Employee who qualifies for DCUE Dental Reimbursement you can enroll yourself and all your dependents. If you have other dental coverage DCUE Dental is always considered "secondary". Any balance that is not covered by your primary dental insurance can be submitted to DCUE Dental for reimbursement. See question 9 for filing claims correctly.
19. **Is Oral Surgery covered by DCUE Dental?** Yes, we cover Oral Surgery claims. However, we advise everyone to consult their health insurance first to see if a portion will be covered by them.
20. **Why was my claim form returned?** When a claim form is returned by our office there is a notice(s) attached to it stating what is needed in order to process the claim. Filing instructions are on the back of the claim form and available on the dcue.org website, under the Dental Tab.
21. **When is DCUE Dental's Plan Year?** DCUE Dental's plan year runs from September 1 through August 31 each year. The deadline for submitting claims for reimbursement for a plan year is October 31st after the end of the plan year end for expenses incurred in that plan year. For example, if you incurred claims on August 15th of a plan year, you would have until October 31st or 60 days after the end of the plan year to submit the claims for reimbursement.
22. **How often can I go to the dentist?** You can go as many times and whenever you need to during a plan year. DCUE Dental has no time stipulations for coverage.
23. **Is the \$2000 Lifetime Cap on Orthodontic treatment separate from annual maximum reimbursement?** Yes. The lifetime maximum you can receive in orthodontic claim reimbursement is \$2,000. Separate dollars from the annual maximum of \$1,325 in dental claim reimbursement. Please refer to the tiers in the orthodontic amendment 9/1/2016, available on the website.
24. **Does my family share benefit dollars?** No, each person has their own reimbursement money. Each individual can receive up to \$1,325 per plan year, based on a claimed amount of \$2,000, plus a potential of \$2,000 in ortho claim reimbursement.
25. **Why do we have a reimbursement plan vs. dental insurance?** The dental reimbursement plan was developed to cut the high administration fees that insurance companies charge, thus giving more back to members through plan benefits.