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12-30-1981

Technical Bulletins: Bidding and Evaluating Dental Insurance

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Municipal Technical Advisory Service

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Recommended Citation

Head, William Gary, "Technical Bulletins: Bidding and Evaluating Dental Insurance" (1981). *MTAS Publications: Technical Bulletins*.

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technical bulletin

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Municipal Technical Advisory Service
Institute for Public Service, The University of Tennessee
In cooperation with the Tennessee Municipal League

December 30, 1981

BIDDING AND EVALUATING DENTAL INSURANCE

By Wm. Gary Head, MTAS Management Consultant

As city budgets continue to tighten, administrators will look for ways to increase employee benefits in an effort to moderate salary requirements. Increasingly, cities are considering dental insurance as a way to meet employee demands for improved benefits.

This technical bulletin is intended as a brief summary of the types of dental insurance available and, with a small amount of additional information and assistance, can be used as a guide in bidding and evaluating such coverage.

Dental insurance packages usually are quoted in four components: Coverages A, B, C, and D. Each has specific allowables and limitations:

Class A Coverage: Includes examination, cleaning, temporary orthodontic work, emergency treatment, X-rays, etc. Normally, insurance carriers will bid either 80 or 100 per cent payment for these services.

Class B Coverage: Includes extractions, oral surgery, fillings, anesthetics, diseases, root canals, repair of crowns, etc. Insurance carriers commonly quote either 50 or 80 per cent payment.

Class C Coverage: Includes fixed bridgework, removable dentures, crowns, and other major structural work. Carriers seldom, if ever, provide more than 50 per cent payment.

Class D Coverage: For orthodontic work. Coverage frequently is limited to minor dependents and always includes a lifetime limitation per person of \$1,000 to \$2,000. The usual quote is for 50 per cent payment.

Other Considerations

Most dental policies provide for an annual deductible in the range of \$25 to \$50 per person, although frequently there is a limit of three deductibles per family. Policies also provide an annual limitation on the amount which can be spent on each person (\$1,000 to \$2,000).

A word of caution is necessary about providing this benefit for employees. It is obvious that, with the possible exception of Class A coverage, the employee does not receive 100 per cent reimbursement. If this benefit is offered, care

should be taken that each employee fully understands the level of coverage provided; otherwise, the employee could feel he or she had been misled when required to pay half or more of the cost of the dental service.

For additional information, contact your MTAS consultant.

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