

TEAMSTERSCARE DENTAL & VISION BENEFITS

Highlights of Your Coverage In the Dental & Vision Program

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Eligibility for the TeamstersCare Dental & Vision Program

How You First Become Eligible

Teamsters Union 25 Health Services & Insurance Plan, more commonly called TeamstersCare, offers you and your family a generous, comprehensive dental and vision program. You become eligible for this program based on the terms of your Teamsters Union 25 Collective Bargaining Agreement requiring contributions to the Plan. Once you are eligible, TeamstersCare will send you a Dental and Vision Enrollment form to complete and return in order to activate your coverage.

Dependent Eligibility

Once your own eligibility begins, your dependents also become eligible for the TeamstersCare Dental & Vision Program. Eligible dependents include:

- Your current spouse, or an ex-spouse who was covered by the Plan when you divorced, or an ex-spouse who was an eligible and enrolled dependent when a new employer begins submitting contributions to the Plan, in cases where you have a divorce decree requiring you to cover your ex-spouse. (Note: new members cannot cover an ex-spouse if the member was divorced or legally separated before joining the Plan.)
- Your eligible children, up to the end of month in which they turn age 26. "Eligible children" include your natural children; dependent children of your eligible dependents; legally adopted children; children placed with you for adoption; stepchildren; children for whom the member has been appointed legal guardian and foster children. TeamstersCare also covers member's children named under a Qualified Medical Child Support Order, provided a copy of this order is filed with the Plan.

I. Your TeamstersCare Benefits: Dental

Under the TeamstersCare dental program, you and your eligible dependents have three options when you need dental care.

Dental Plan Options

Option #1: A TeamstersCare Dentist. You can use our In-House Charlestown, Chelmsford, or Stoughton facilities for your dental work. There is no charge to you for preventive visits such as oral exams, x-rays, and cleanings. For all other visits, you make a \$5 or \$10 TeamsterShare Payment, depending on the service provided.

Option #2: A Dentist in the Delta Dental PPO Plus Premier network. TeamstersCare has an agreement with *Delta Dental PPO Plus Premier* providers, a national network of "private"

dentists across the country who provide services at discounted rates. This network of providers allows members who live out of state to get the same deep discount as members in Massachusetts. When you use a provider who participates in the *Delta Dental PPO Plus Premier* network, you have to pay part of the costs, but you have the advantage of a discounted rate and the dentist will take care of submitting the claim.

Option #3: Any Other "Private" Dentist. You can use any "private" dentist you like. However, your share of the costs will generally be larger than if you went to a dentist participating in the *Delta Dental PPO Plus Premier* network, and you may be involved in some of the paperwork.

<u>Important Note:</u> Some dentists who participate in the Delta Dental network may not be in the Delta Dental PPO Plus Premier network. You can use these other Delta Dental providers, but it will cost you more.

Option #1: TeamstersCare Dental Offices

You and your family have an outstanding option for a broad range of dental services at three convenient locations: TeamstersCare dental offices in Charlestown, Chelmsford, and Stoughton. There is no charge to you for preventive visits. For filling visits, you make a \$5 TeamsterShare Payment. For denture, root canal, and extraction visits, you make a \$10 TeamsterShare Payment, and there are no claims to submit.

TeamstersCare dental offices are staffed with experienced dental professionals: dentists, hygienists, and dental assistants.

Scheduling an Appointment

The Charlestown, Chelmsford, and Stoughton offices have convenient office hours:

- Monday through Thursday—8 a.m., with some evening appointments until 8 p.m.
- Fridays and Saturdays—8 a.m. to 4 p.m.
- To make an appointment, call the TeamstersCare dental office you plan to visit, using one of the following numbers:

•	Charlestown	
	local:	617-241-9220
	in Massachusetts:	800-442-9939
	outside Massachusetts:	800-225-6135
•	Chelmsford	
	local:	978-256-9728
	toll free:	800-258-2111
•	Stoughton	
	local:	781-297-7360
	toll free:	877-326-1999

Services Provided at TeamstersCare In-House Dental Offices

The following general services are available at our three TeamstersCare dental offices:

- dental examinations and x-rays
- fluoride treatment and sealants
- cleaning and scaling
- fillings—amalgam and composite (silver and white)
- root canals—for front upper and front lower teeth
- simple extractions—loose primary or permanent teeth (at the discretion of the TeamstersCare dentist)
- dentures—full or partial
- denture adjustment, repair & reline
- second opinions
- emergency care during office hours—including evaluating and treating dental problems that are within the scope of the services provided at our TeamstersCare dental offices

Option #2: A Private Dentist in the Delta Dental PPO Plus Premier Plan

TeamstersCare has contracted with Delta Dental to provide you with access to dentists who provide both routine and specialty services—and at the same time help you save money on dental care.

Our main relationship is with providers who participate in the *Delta Dental PPO Plus Premier* network. It is this group which gives you the largest discounts. You may use other Delta Dental dentists (for example, dentists who participate in the *Delta Dental Premier* network), but you won't get the same discounts. Generally speaking, you'll pay the least out of your own pocket when you use *Delta Dental PPO Plus Premier* dentists.

<u>Important Note:</u> To determine whether a particular dentist is in the Delta Dental PPO Plus Premier network, call Delta Dental's Customer Service at 1-800-872-0500. Have your Delta Dental PPO Plus Premier I.D. card available so you can refer to it for TeamstersCare group information.

Option #3: A Private Dentist Not in the Delta Dental PPO Plus Premier Plan

If you seek care in a private dental office, you do not have to use a Delta Dental PPO Plus Premier plan network dentist. However, when you go outside the network, you'll generally have to pay an even larger share of the cost, and you may be involved in some paperwork.

What You Pay for "Private" Dental Services

For purposes of our TeamstersCare program, a "private" dentist is any dentist other than our own In-House practitioners working in Charlestown, Chelmsford, and Stoughton. Thus, a "private" dentist would include any Delta Dental network dentist (*Delta Dental PPO Plus Premier, Delta Dental Premier*, etc.) and all other non-network dentists. Assuming it is covered by the Program, when you have a dental procedure performed by any "private" dentist—*Delta Dental PPO Plus Premier* or otherwise—TeamstersCare has a pre-set *Fee Allowance Schedule* listing the dollar amount it will pay for that procedure. TeamstersCare's *Schedule* is based on amounts charged by *Delta Dental PPO Plus Premier* dentists. However, for purposes of our Program, those same fee allowance amounts apply to procedures performed by any private dentist.

Regardless of which private dentist you use, TeamstersCare always pays this same dollar amount for any particular procedure listed in the *Schedule*. You pay the difference between TeamstersCare's portion and the dentist's allowable charge when you use a Delta Dental dentist. In the case of a non-network dentist, you pay the difference between TeamstersCare's portion and the dentist's actual charge.

Since different dentists will charge different amounts—even for the same procedure—your share of the cost can vary significantly depending on which dentist you use. Again, your share is likely to be lowest when you use a *Delta Dental PPO Plus Premier* dentist, since by contract *Delta Dental PPO Plus Premier* providers offer TeamstersCare members the deepest discounts.

Deductible When You Use a "Private" Dentist

When you use a "private" dentist (i.e., any dentist other than those working in our own TeamstersCare dental offices), you pay a deductible for any services other than preventive care. The Program limits the amount of deductibles you pay in any one year, as follows:

- *Preventive services*—no deductible
- *All other visits*—up to a maximum of \$50 per person, per year, with a maximum of two deductibles (\$100) per family, per year

After you pay your deductible, the Program pays its share of the cost according to the Fee Allowance Schedule.

Maximum Benefit When You Use a "Private" Dentist

When you use a "private" dentist (i.e., any dentist other than those working in our own TeamstersCare dental offices), the maximum amount the Program will pay, per person, per calendar year is \$2,000.

When You Visit a "Private" Dentist

Present Your Delta Dental PPO Plus Premier ID Card

As a member of the TeamstersCare Dental Program, you will receive an ID card that you must show whenever you visit a private dentist—whether or not that dentist is part of the Delta Dental Network.

- For a Delta Dental provider—the card ensures you receive the TeamstersCare discount
- *For any other private dental office*—the card provides information the dentist will need for accurate billing

For More Information

To determine whether a particular dentist participates in the Delta Dental PPO Plus Premier network, please visit **www.deltamass.com** or call 1 (800) 872-0500.

Orthodontia

TeamstersCare pays 50% of orthodontic fees, up to a \$2,000 lifetime maximum per person.

Dental Expenses Not Covered

TeamstersCare does not provide dental benefits for the following:

- services or supplies in a U.S. government or government agency hospital
- services under any government law or program to which you might be entitled
- treatment of a work-related condition
- cosmetic dental services—unless the procedure is required because of an accident that happens while you are covered by TeamstersCare; certain limitations apply
- treatment by anyone other than a licensed dentist or physician—or a qualified dental technician working under a dentist's or physician's direction
- training or supplies used for dental care education
- treatment for temporomandibular joint syndrome—except to treat a specific medical condition verified by x-ray or other diagnostic tests; certain limitations apply
- experimental procedures
- charges above any amounts listed in the TeamstersCare Dental Fee Allowance Schedule
- charges you or your family members are not obligated to pay
- services provided for injuries that result from a war, declared or undeclared
- charges for missed appointments

Pre-Treatment Dental Estimates

TeamstersCare provides a service that helps you estimate your share of dental expenses before you're actually treated. If your dentist recommends extensive treatment, the dentist can submit to Delta Dental a pre-treatment estimate form that will enable Delta Dental to estimate your share of the cost. Getting the estimate is voluntary, but it can help avoid uncertainty about the amount you'll be responsible for. You can then plan the treatment and manage your expenses accordingly.

Filing A Dental Claim

When you go to a TeamstersCare in-house dental office, you file no claims. Delta Dental handles all private dental office claims for TeamstersCare members. This includes claims for services provided by Delta Dental dentists, and also claims from private dentists who do not participate in the Delta Dental Network. Claims may be administered differently, depending on which dentist you choose.

In cases where you're required to submit a claim yourself, the appropriate forms should be available at your dentist's office. Otherwise, call Delta Dental Customer Service directly at 1 (800) 872-0500.

Dental claim forms should be addressed to: Delta Dental Plan P.O. Box 9695 Boston, MA 02114 <u>Important Note:</u> If you have any questions about how a claim should be handled, call TeamstersCare or check the detailed plan description you receive after you enroll in the TeamstersCare Dental/Vision Plan.

Coordinating with Other Dental Plans

If you or a dependent has other dental coverage—such as through your spouse's plan– any benefits you receive from that other plan will be coordinated with your TeamstersCare benefit. Taken together, total payments from all plans cannot be more than 100% of the charges.

Once you're enrolled in the TeamstersCare Dental Program, you must inform TeamstersCare if you become covered by any other plan that provides dental coverage.

II. Your TeamstersCare Benefits: Vision

TeamstersCare has a contract with Davis Vision to provide you and your dependents with excellent vision benefits, at very little or cost to you.

Davis Vision Network

Davis Vision boasts a network of approximately 30,000 points of provider access across the country. Under TeamstersCare's Program, you can visit any participating Davis Vision provider for a broad range of eye care services and supplies—in many cases, at no cost to you.

Vision Exams

You and your spouse are eligible for an eye exam (including dilation) once every 24 months. Your dependent children, up to the end of the month in which they turn age 26, are eligible for an eye exam (including dilation) once every 12 months.

Materials You Can Select

The Program offers a wide assortment of eyewear, all with a one-year warranty. You can select:

- *at no cost to you*—eyeglasses; a wide variety of frames and lenses (see below for more information).
- *for a \$25 copay*—standard, daily-wear soft contact lenses, or a three-month supply of disposable lenses with a cleaning kit and all visits needed to fit the lenses and provide follow-up care.

<u>Important Note</u>: When choosing either eyeglasses or contacts, you must make your full selection at the time you have your authorized eye examination. If you go to an office that does not dispense eyeglasses, you much order your eyewear through another provider within 30 days in order for the materials to be covered.

Coverage for Eyewear

TeamstersCare's Vision Program provides you and your eligible family members with Plan eyeglasses from a full eyewear selection. The benefits for you and your dependents are somewhat different:

• *Member coverage*: Every 24 months (eligible on the first day of the month) you can receive up to three pairs of Plan eyeglasses or one pair of Plan contact lenses.

- If choosing eyeglasses, two pairs may be any combination of lenses but the third pair is limited to single-vision only. Safety glasses may be substituted for all pairs of dress eyeglasses. If desired, one pair may be Plano (non-prescription lenses).
- Contact lenses take the place of all pairs of eyeglasses.

• *Spouse coverage*: Every 24 months (eligible on the first day of the month) your spouse can receive up to two pairs of Plan eyeglasses or one pair of Plan contact lenses.

- If choosing eyeglasses, both pairs may be any combination of prescription lenses.
- Contact lenses take the place of all pairs of eyeglasses.

• *Dependent coverage*: Every 12 months (eligible on the first day of the month) your dependent child(ren) can receive one pair of Plan eyeglasses (selected at the time of the exam) or one pair of Plan contact lenses.

If You Choose Contact Lenses

You can select either contact lenses or eyeglasses, but not both. If you choose contact lenses, you then have to wait 24 months before you can select eyeglasses from the Program. Also, once the contact lenses are fitted, you cannot exchange them for eyeglasses. The Program does not cover extra contact lenses, replacements, or contact lens insurance. However, if you select disposable lenses, Davis Vision may offer additional lenses for a discount. For information on this option, call 1-800-LENS123.

For contact lenses, you pay a \$25 copay directly to the Davis Vision provider. If you need a type of contact lens not covered by the Program, TeamstersCare will pay for your eye exam, but you must pay all other costs.

Using the Vision Program

To schedule an appointment, you should contact a Davis Vision provider directly. You will receive a directory of participating Davis Vision optometrists when you enroll in the Program, and may also obtain a list of participating providers by calling 1 (800) 999-5431 or visiting **www.davisvision.com**. The ID number that you and your eligible dependents should refer to when scheduling an appointment is the member's social security number. When you call, the Davis Vision office will help determine whether you're eligible for an examination and materials under the Program.

<u>Important Note:</u> For vision care, it's important to remember that equipment, services, and supplies are covered only when they're provided through the TeamstersCare Vision Program at a Davis Vision network provider.