

Dental Insurance

2016 - 2017



Open Enrollment summary for Retirees
and Former Employees with Disabilities

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An overview of your dental benefits

As a retired state employee or as a former state employee who has disabilities you pay the full cost of your State Employee Group Insurance Program (SEGIP) dental benefits. Since you are still included in the state's employee group insurance contracts, the rates you pay for this coverage are lower than what you probably pay under an individual dental plan.

This booklet is designed to help you locate information on Minnesota Management & Budget's (MMB) SEGIP website so that you can make decisions about the SEGIP dental benefits that will be available for the next two years. Use it during the Open Enrollment period to learn the details and costs of your dental coverage options and to sign up for the coverage you desire. After Open Enrollment, you're encouraged to keep the booklet as a reference guide for your dental benefits.

For information about Open Enrollment, state retirees and former employees with disabilities may call the SEGIP Service Center at 651-355-0100 or 800-664-3597. Participants with hearing or speech disabilities can contact SEGIP using their preferred Telecommunications Relay Service. The Service Center is available Monday through Friday from 8:00 AM to 4:00 PM, October 12 – November 9, 2015.

Eligibility

If you are a retiree or former state employee with a disability, you and your eligible dependents are able to continue your dental coverage through SEGIP at your own expense.

Caution: If you choose not to continue your dental coverage with SEGIP at any time, you and your eligible dependents may never re-enroll in the SEGIP dental plans.

Current participants in SEGIP may change plans during a dental Open Enrollment period. For explanations of the different options available to retirees and former employees with disabilities, see page 2 under the Open Enrollment heading.

Important Plan Note

The descriptions in this book are meant only to highlight the benefits provided by each carrier. Please refer to the Certificate of Coverage or Summary of Benefits for a complete description of all benefits and exclusions. If there are any differences between this document and the plan's Certificates of Coverage or Summaries of Benefits, the Certificate of Coverage and Summary of Benefits will govern.

The state expects to continue the State Employee Group Insurance Program (SEGIP) indefinitely. However, the state reserves the right to change or discontinue all or any part of the program, consistent with the state's rights and obligations under law and collective bargaining agreements.

The plan assumes fraud or intentional misrepresentation if a participant enrolls a dependent who does not meet the Plan's definition of a dependent. Coverage will be rescinded to the effective date of coverage with a 30 day notice. You may be liable for all claims paid by the plan on behalf of an ineligible dependent.

Dental plans offered in 2016-2017

The following alphabetical listing shows the dental plans available to you through the State Employee Group Insurance Program for 2016 and 2017.

- HealthPartners State of Minnesota Dental Plan
- State Dental Plan (Delta Dental)

Both the State Dental Plan and the HealthPartners State of Minnesota Dental Plan are available in all Minnesota counties.

Premiums

You pay the full cost of dental coverage for yourself and your eligible family members. The monthly cost varies depending on whether you cover yourself only or yourself and other eligible family members. Premiums are decreasing between 1.56% and 1.59%. Unlike previous years, the premiums are the same between the two carriers. The 2016 monthly premium you pay for coverage under each of the participating dental plans is listed on page 3.

What's New

Increased coverage: The level of coverage for restorative care will increase from 60% to 80% when using an in-network provider.

Open Enrollment

The Open Enrollment period for the 2016 – 2017 dental plans is **October 27, 2015 – November 9, 2015**. Retirees may only change dental plans or carriers during this period. **Retirees may not add family coverage.** Former Employees with Disabilities may add family coverage during Open Enrollment and/or change their dental carrier. Participants are advised to ensure any dependents added meet eligibility requirements. Dependent eligibility can be found on the SEGIP website at mn.gov/mmb/segip. Following Open Enrollment, you may be required to provide documentation verifying the status of your dependent.

You and your family members cannot enroll in different dental plans.

Check with your plan during Open Enrollment to see if your provider will be in the plan's network for the new insurance year. Current participation does not guarantee availability through the term of this dental contract. If your current carrier will be available to you and you do not want to change your dental plan for 2016 – 2017, you do not need to take any action.

The new plan period is January 1, 2016 to December 31, 2017. Your dental coverage selection will be effective from January 1, 2016 through December 31, 2017. Your current coverage remains in effect until December 31, 2015.

Open Enrollment (continued)

To **change** dental plans:

(You DO NOT have to return forms if you want to keep the dental plan you have now.)

1. Review the lists of in-network providers available on the SEGIP website or call the carrier to ask if your dentist is part of the in-network provider group.
2. Review the plan design and 2016 premium rates.
3. Remove and complete the form on page 10 of this booklet and mail it directly to the new plan you want to move to, effective January 1, 2016. The envelope must be postmarked by midnight, November 9, 2015. Addresses are listed on page 6.
4. Promptly notify your current dental plan of the change by completing the Cancellation Form on page 11 of this booklet and mail it directly to the plan you are cancelling.

2016 Monthly Dental Plan Rates

Dental Plan	Retiree/Former Employee Only	Family	Surviving Spouse Only
HealthPartners State of Minnesota Dental Plan	29.70	87.84	29.70
State Dental Plan (Delta Dental)	29.70	87.84	29.70

Availability by county

The State Dental Plan, administered by Delta Dental, offers total coverage in all Minnesota counties. The HealthPartners State of Minnesota Dental Plan offers total coverage in all Minnesota counties.

It is advisable that you enroll in the SEGIP dental plan that is available in your home county. Your Open Enrollment dental plan selection will be in force for plan years 2016 and 2017.

Plan Highlights

The state offers two dental plans. The State Dental Plan is administered by Delta Dental and HealthPartners State of Minnesota Dental Plan is administered by HealthPartners. Benefits in both plans are similar, but there are some differences in the way benefits are administered. The annual maximum benefit per participant is \$1,500.

Dental Plan Features

Your SEGIP dental plan offers the following benefits:

Comprehensive Coverage

The SEGIP dental plans provide comprehensive coverage that includes many preventive services such as periodic examinations, x-rays, and cleanings. The plan also provides coverage for corrective and restorative services like fillings, restorative crowns, root canals, and extractions. Review the plan's Certificate of Coverage, available on the SEGIP website for detailed information on frequency and limitations of covered services.

Provider Networks

Each SEGIP dental plan offers a network of dental providers. Using an in-network dentist provides you the highest level of coverage available. If you don't receive your care through the appropriate provider network, you will not receive the highest level of benefits or you may not receive any benefit at all.

The SEGIP website provides links to the provider directories published by our dental carriers. To access, click on the "2016 Open Enrollment" link on the SEGIP website. After clicking on Retiree Info or Former Employees with Disabilities, you can click on either State Delta Dental (Group 216) or the HealthPartners State of MN Dental Plan Dentist Search. You may also call the customer service centers of Delta Dental or HealthPartners to learn whether your dentist will be included in their provider network.

Predetermination of Benefits

When services other than preventive care are recommended, ask your dentist to submit a request for a predetermination of benefits or pre-estimate to your plan. This provides a guide for you to understand the approximate amount your plan will pay and the amount that will be your responsibility.

Transition of Care

There are some differences in the benefits and the administration of the benefits between the two dental plans the state offers. If you or your dependents are undergoing dental treatment that will extend into the next plan year and are considering changing plans, call your new plan to understand how this will affect your dental benefit. This especially pertains to orthodontia treatment for eligible dependents.

Dental Schedule of Benefits for 2016-2017

Annual Maximum per person \$1500 (does not apply to Orthodontia) .		
Covered Services	In-network Benefits	Out-of-network Benefits
Diagnostic and preventive care		
Preventive care; examinations, x-rays, oral hygiene & teeth cleaning	100% coverage (deductible does not apply)	50% coverage (allowed amounts and deductible does not apply)
Fluoride treatment (to age 19)	100% coverage (deductible does not apply)	50% coverage (allowed amounts and deductible does not apply)
Space maintainers	100% coverage (deductible does not apply)	50% coverage (allowed amounts and deductible does not apply)
Annual Deductible	\$50 per person \$150 per family	\$125 per person
Restorative care and prosthetics		
Fillings (customary restorative materials)	80% coverage after deductible	50% coverage of the allowed amount after deductible
Sealants	80% coverage after deductible	50% coverage of the allowed amount after deductible
Oral surgery (simple extractions and root canals)	80% coverage after deductible	50% coverage of the allowed amount after deductible
Periodontics (gum disease therapy)	80% coverage after deductible	50% coverage of the allowed amount after deductible
Endodontics (root canal therapy)	80% coverage after deductible	50% coverage of the allowed amount after deductible
Inlays and overlays	80% coverage after deductible	50% coverage of the allowed amount after deductible
Restorative crowns	80% coverage after deductible	50% coverage of the allowed amount after deductible
Fixed or removable bridgework	50% coverage after deductible	50% coverage of the allowed amount after deductible
Full or partial dentures	50% coverage after deductible	50% coverage of the allowed amount after deductible
Dental relines or rebases	50% coverage after deductible	50% coverage of the allowed amount after deductible
Orthodontics - \$2400 Lifetime Maximum (does not start over if you change dental plans)	50% coverage (deductible does not apply). Coverage is limited to dependents under age 19.	50% coverage of the allowed amount (deductible does not apply). Coverage is limited to dependents under age 19.

Emergency services are covered at the same benefit level as non-emergency services.

See Certificate of Coverage for specific plan limitations

Other Information

Dental plan addresses and phone numbers

HealthPartners State of Minnesota Dental Plan
 Attn: Membership Accounting
 P.O. Box 297
 Minneapolis, MN 55440-0297
 952-883-7900
 888-343-4404

Minnesota Management & Budget
 400 Centennial Office Building
 658 Cedar Street
 St. Paul, MN 55155
 651-355-0100
 1-800-664-3597

State Dental Plan
 Delta Dental of Minnesota
 P.O. Box 330
 Minneapolis, MN 55440-0330
 Eligibility & Claims questions:
 651-406-5916 or 800-553-9536
 Premium Billing & Payment questions:
 651-406-5909 or 800-926-5530
 statemnindbilling@deltadentalmnadmin.org

Exclusive Retiree Open Enrollment Meetings

It is not necessary to register to attend. Meetings will begin with a one hour presentation. Carriers will take individual questions at their tables during the final hour. Meetings may end early if attendance dictates. Questions about these meetings should be directed to SEGIP.

Date	Time	Location
October 27, 2015	10:00 a.m. - 12:00 noon	MnDOT Mankato 2151 Bassett Drive Mankato, MN 56001
October 28, 2015	10:00 a.m. - 12:00 noon	MSRS Building, Rm. 106 60 Empire Drive St. Paul, MN 55103
October 29, 2015	1:00 p.m. - 3:00 p.m.	Rochester Public Library 101 Second Street SE Rochester, MN 55904
October 30, 2015	10:00 a.m. - 12:00 noon	Southdale Library 7001 York Avenue S Edina, MN 55435
November 2, 2015	10:00 a.m. - 12:00 noon	MSRS Building, Rm. 106 60 Empire Drive St. Paul, MN 55103
November 3, 2015	10:00 a.m. - 12:00 noon	Brainerd Fire Department 23 Laurel Street Brainerd, MN 56401
November 4, 2015	10:00 a.m. - 12:00 noon	MnDOT Duluth 1123 Mesaba Avenue Duluth, MN 55811

Glossary

Certificate of Coverage: A document, provided to plan participants, describing details of coverage. Insured plans call this a certificate of coverage and self-insured plans call this a summary of benefits.

Deductible: The amount that a covered person must pay before the insurance plan covers a benefit. The deductible renews annually or each plan year. Some plans have separate deductibles for specific services, such as out-of-network provider services.

Dependent: Generally, the spouse and children of an insured person, as defined in the insurance policy or plan. Verification or documentation of the legal relationship is required when requested.

Effective Date: The date on which an insurance policy or plan goes into effect and coverage begins.

Family Coverage: Dental insurance for the retiree or former employee with a disability and all eligible dependents (family can be one or more than one dependent).

In-network: The group of dental care providers with whom a carrier has contracted to provide services to members of the plan. Networks may change during the year, so ask if a provider is still participating with your carrier before you seek or receive services.

Open Enrollment: The period during which participants in the State Employee Group Insurance Program have an opportunity to change from one plan or carrier to another.

Provider: A dentist or other licensed dental practitioner who provides dental services. A participating provider is a provider who contracts with a plan to provide services to members of the dental insurance plan.

Summary of Benefits: A document, provided to plan participants, describing details of coverage. Insured plans call this a certificate of coverage and self-insured plans call this a summary of benefits.

NOTICE OF COLLECTION OF PRIVATE DATA

Minnesota Management & Budget (MMB) administers the State Employee Group Insurance Program (SEGIP). This notice explains why we may request information (data) about you, your spouse, and dependents, how we will use it, who will see it, and your obligation to provide that information.

What information will we use?

We will use the information you provide us at this time, as well as information previously provided us, about yourself, your spouse, or dependent(s). If you provide any information about that is not necessary, we will not use it for any purpose.

SEMA4, the information system used to administer employee benefits, contains required information fields that may not be necessary for us to process your request. We do not need the gender or marital status for your beneficiary designation, so you may enter "unknown" in these fields. We only need your dependent's date of death to process a death benefit claim or to discontinue the dependent's coverage due to his or her death. Student status and disability status are needed only to determine eligibility for insurance continuation for your dependent. We need the social security numbers and birth dates of your spouse and dependent to offer insurance continuation, process a death benefit, to ensure we are matching them to the correct insurance benefit transaction and to comply with federal Medicare coordination laws.

Why we ask you for this information?

We ask for this information so that we can successfully administer SEGIP. This information is used to process your request to add or change coverage for yourself, your spouse, dependents or beneficiary. The requested information helps us to determine eligibility, to identify you and your spouse, and dependents, and to contact you or your spouse, and dependents. The information is also used to develop new programs, ensure current programs effectively and efficiently meet member needs, and to comply with federal and state law and rules. We may ask for information about you, your spouse or dependents that we have already collected, including all or part of your social security number, in order to ensure we are matching you to the correct insurance benefit transaction.

Do you have to answer the questions we ask?

You may not be legally required to provide any of the information requested.

What will happen if you do not answer the questions we ask?

If you do not answer these questions, the insurance benefit transaction you requested for you or your spouse, dependent or beneficiary or other insurance benefit transaction may be delayed or denied.

Who else may see this information about you and your spouse and dependents?

We may give data about you and your spouse, and dependents to the insurance carrier you have chosen, SEGIP's other representatives, vendors and actuary; the Legislative Auditor; the Department of Health; the Department of Commerce; and any law enforcement agency or other agency with the legal authority to the information; and anyone authorized by a court order. In addition, the parents of a minor may see information on the minor unless there is a law, court order, or other legally binding instrument that blocks the parent from that information.

How else may this information be used?

We can use or release this information only as stated in this notice unless you give us your written permission to release the information for another purpose or to release it to another individual or entity. The information may also be used for another purpose if Congress or the Minnesota Legislature passes a law allowing or requiring us to release the information or to use it for another purpose.

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