

## **Dental Communication 2009**

Michigan Tech and Aetna wanted to address some questions that have been raised regarding the dental plan for 2009. As with our previous plan, you can continue to visit any dentist you had previously used and still have as good as or better benefits than you have had in the past.

We have compared the reimbursement schedules for both Aetna and the network provider that Blue Cross/Blue Shield used. Assuming that your non-network dentist continues to charge the same fee as in the past, your out of pocket expense should be less since Aetna's reimbursement rate is higher. Your dentist has the right to charge any amount they may choose. They are not required to accept Aetna's reimbursement amount and may bill the balance to the member. However, given that Aetna's reimbursement schedule is generally higher than that available through the Blues, your out of pocket expense should be less.

Members can choose any dentist they want, whether participating in the PPO network (in-network) or non-participating (out-of-network). However, members visiting participating dentists generally save on the cost of dental care because the dentist can charge no more than the Aetna negotiated rate (which is generally less than his/her normal fee) and benefits are based on this negotiated rate. Participating dentists have agreed not to bill the balance to the members.

To provide more opportunity to realize the benefits of using a participating provider, Aetna is in the process of actively recruiting additional providers in the areas where Michigan Tech employees are located. Please let us know if you have a provider that may be interested in joining the Aetna network.

If you have any questions please feel free to contact us. We appreciate all the feedback that you have passed on to help us continue to improve the service we provide to the Michigan Tech community!