GM and Chrysler Retirees 2015 Dental Benefit FAQ

Dental Coverage Reference

	2014 Trust Preventive Dental Coverage			NEW 2015 Trust Dental Coverage		
Comparison of Trust Preventive Dental Benefit and 2015 Dental Benefit	Delta Dental PPO Dentist	Delta Dental Premier Dentist	Nonpar Dentist	Delta Dental PPO Dentist	Delta Dental Premier Dentist	Nonpar Dentist
Diagnostic, Preventive, and Minor Restorative Services (Plan Coverage Amounts)						
Exams, Cleanings (routine or						
periodontal twice per year), Flouride	100%	75%	50%	100%	100%	100%
Treatment						
Emergency Treatment	100%	100%	100%	100%	100%	100%
X-Rays	100%	75%	50%	100%	90%	90%
All Other Services (Plan Coverage Amount)						
Fillings (non-white; metallic)	100%	75%	50%	100%	90%	90%
Endodontic - root canals						
Periodontic - to treat gum disease	No Coverage			100%	90%	90%
Extractions - removal of teeth						
Reline and Repair Services -to						
dentures, bridges and implants						
Major Restorative (crowns) and Other	No Coverage			90%	90%	90%
Oral Surgery					2070	2070
Prosthodontic Services – bridges and	No Coverage			70%	50%	50%
dentures						
Orthodontic Services – braces (treatment must begin prior to age 19)	No Coverage			60%	50%	50%
Orthodontic Lifetime Maximum	No Coverage			\$2000 per person		
Annual Plan Maximum	\$800 per person			\$1700 per person		

*Green indicates increased coverage level

• When will the new benefits be effective?

- January 1, 2015.
- Will coverage be through Delta Dental? Will they send us a mailing on our new benefits?

Yes. Delta Dental will mail you a Summary of Delta Dental Plan Benefits and additional information about your plan, including Customer Service contact information and instructions on how to find participating providers.

- Will I pay an additional cost for this coverage?
 - No. There is no additional cost for Dental coverage.
- Are other benefit costs being increased in order to pay for these benefits?
 No.
- Do I need to keep my COBRA coverage; are there any advantages?
 - The decision to retain COBRA coverage is completely up to the individual.
 - I recently retired and was offered 18 month COBRA is there any benefit to keep it for 2015?
 - There is little benefit to having both coverages as the COBRA benefit will run out after 18 months and the Trust provided coverage is comparable.
 - I retired before the bankruptcy and therefore have Lifetime COBRA coverage, is there any benefit to keeping it for 2015?
 - If at some point, benefits through the Trust were eliminated the Trust would be required to provide COBRA coverage for up to 18 months. Members would need to weigh the likelihood of such a scenario and determine if paying the monthly COBRA premium in order to retain COBRA lifetime coverage as a backstop makes sense economically for them.

• If I keep my COBRA coverage what is the benefit?

- Since COBRA and Trust coverage are comparable there is little benefit to having both.
- Members who have COBRA coverage are eligible to keep that coverage by continuing to pay the monthly COBRA premium. With both COBRA and Trust coverage <u>COBRA would be primary</u>.

• What should I consider before cancelling my COBRA dental coverage?

• The new Dental Benefits will not take effect until January 1, 2015. If you cancel prior to that date, you will have only the Trust Preventive Dental until January 1, 2015.

If you decide to discontinue your COBRA dental benefit, you will receive the Trust benefit as your primary dental coverage. **Members who drop their COBRA coverage through GM or Chrysler** <u>cannot</u> re-enroll in their COBRA plan.

If you want to drop your COBRA dental coverage, you may do so by calling:

GM Benefits & Service Center (800) 489-4646

To drop coverage as of 1/1/2015, you need to call by November 19, 2014

Chrysler Benefit Express (888) 409-3300 To drop coverage as of 1/1/2015.

To drop coverage as of 1/1/2015, you need to call by November 12, 2014

• Will the new Dental coverage coordinate with other coverage?

• Yes. Coordination of Benefit rules state that the Trust benefit will not provide any additional benefit beyond what the primary payer would have paid.

• Which is primary if I have COBRA?

• COBRA would be primary

• What if I purchased individual dental coverage, which is primary?

- Individual coverage purchased would be primary and Trust sponsored coverage would be secondary
- If I have coverage for myself through the Trust and non-Trust coverage through my spouse, how does coordination work?
 - Trust Coordination of Benefit rules state that the Trust will not provide any additional benefit beyond what the primary payer would have paid. Those with non-Trust coverage should consult their other coverage for Coordination of Benefit rules and plan information for coverage specifics
 - Which is primary?
 - <u>For the Spouse</u>: The non-Trust coverage would be primary and the Trust coverage would be secondary.
 - <u>For the Retiree:</u> The Trust coverage would be primary and the spouse non-Trust coverage would be secondary. Note: If the retiree has a dental service in 2014 that requires multiple procedures (e.g.; a crown, bridge, partials, or dentures), it is recommended that the retiree completes all of the procedures by December 31, 2014. If completed in the beginning of 2015, it will reduce the annual plan maximum under the Trust's new dental coverage for 2015.
- If both my spouse and I have Trust coverage and eligibility independently and we cover each other, do we get additional coverage or double the benefit level?
 - No. Couples who are eligible for Trust coverage independently can cover each other as spouses; however this provides no additional benefit and often costs more in double cost share elements (monthly contributions, deductibles, out-of-pocket maximums, etc.)
- Is this coverage the same as we had previously through the autos prior to bankruptcies? Is it a full coverage plan?
 - The benefit that will be provided in 2015 by the Trust for Dental and Vision is comprehensive coverage. The carrier providers and networks may differ. Additional information and a schedule of benefits will be available in the fall (see attached coverage chart).

- How can I find out who participates in the network?
 - Dental providers are through the Delta Dental network. If your current dentist is a participating Delta Dental PPO provider then there is no need to change dentists. If your dentist is part of the Delta Dental Premier you can continue to use them. However, you may want to contact Delta Dental to locate a Participating PPO dentist so you can maximize your coverage and percent of benefits paid. Members who utilize non-participating dentists will have reduced coverage and are encouraged to look for another Dentist to increase your coverage and reduce your costs.
- What do I do if dentists in my area do not accept this coverage or are not a participating provider?
 - Delta Dental has coverage under this benefit for in network, extended network and out of network providers with varying percentages of coverage. You can call Delta Dental to find an in-network provider in your area. If you have no other options for participating providers in the network your benefits will still be covered but may be at a reduced benefit level.
- What if I want to disenroll from Trust dental (or vision) coverage, will I get any money since I am not using the benefit?
 - No. The Trust dental and vision coverage is not an electable benefit but part of a total benefit package offered by the Trust. There is no money exchanged if you use or do not use the benefit.