



Frequently Asked Questions Dental Plan

Q. What dental plan does the Michigan Catholic Conference (MCC) offer?

A. The MCC offers one PPO plan, through Delta Dental of Michigan.

Q. Who is eligible to participate in the dental plan?

A. All full-time employees who are scheduled to work 20 or more hours or more per week are eligible to participate in MCC's medical plans. Part-time (those who work less than 20 hours a week), seasonal and temporary employees are not eligible.

Q. I am a new hire. When may I begin participating in the plan?

A. As a new hire, you may begin participating in the plan the first of the month following your date of hire. If your date of hire is the first of the month, you may begin participating on that day.

Q. Who can I cover under the plan?

A. You can cover yourself, your spouse and your dependent children, up to the age of 26.

Q. What is my payroll deduction amount for dental coverage, and when does this amount change?

A. Check with your employer to find out if and/or when your contributions for dental coverage are changing.

Q. Is my premium payroll deduction taken before taxes?

A. Yes, dental benefit premium costs are eligible for pre-tax payroll deduction.

Q. I am a new employee. How will my bookkeeper know what benefits I enroll in?

A. After you enroll in your dental plan, either online or over the phone with the MCC Benefits Team, a benefit confirmation will be sent to your bookkeeper which includes the details of all the benefit programs you elect.

Q. Do I have to go to a specific dentist to be covered?

A. No, but if you choose a non-participating provider, you may have to pay more. Although you usually save money with a Delta Dental dentist, there may be reasons why you wish to visit a non-Delta Dental dentist. If you choose to visit a dentist outside of the Delta Dental network, you may have to submit claims yourself and pay the entire bill up front.

Q. Do I have to pay a deductible?

A. No.

- Q. I never received a card for my dental benefits? What should I do?**
A. Delta Dental does not distribute cards. When you go to the dentist, you can let your provider know that you participate in the Michigan Catholic Conference plan (Group Number is 9253) and give your provider your Social Security Number.
- Q. Does the dental plan cover routine oral exams and routine cleanings?**
A. Yes, oral exams and cleanings are payable at 100 percent, two times in a 12-month period.
- Q. Are fluoride treatments covered?**
A. Yes, fluoride treatments are covered at 100 percent for people up to the age of 19, and are payable two times in a 12-month period.
- Q. Does the Plan pay for X-rays?**
A. Bitewing X-rays are payable two times in a 12-month period, and full-mouth X-rays are payable once in any three-year period.
- Q. I have to have a crown repaired, is this covered?**
A. Yes, a crown is considered a Minor Restorative Service and is payable at 75 percent.
- Q. Does the Plan cover bridges, implants or dentures?**
A. Yes, these types of services are considered Prosthodontic Services and are payable at 50 percent.
- Q. Does the Plan cover adult orthodontia?**
A. No. Orthodontia is only covered for dependent children, up to age 19.
- Q. What is the maximum benefit payment?**
A. \$1,500 per person, per benefit year, on all services except orthodontics. The maximum for orthodontic treatment is \$1,000 per person, per lifetime.
- Q. When may I make changes to my dental plan?**
A. You may make changes to any of your benefit plans during the Open Enrollment period, which is in October every year. No changes are permitted outside of Open Enrollment, unless you have a Qualifying Life Event (QLE), such as the birth or adoption of a child.
- Q. Where can I find more information about MCC's Dental Plan?**
A. You can find specific plan information online by visiting [here](#). You may also call MCC Benefits at 800-395-5565 or email your request to Benefits@MICatholic.org. You may also call Delta Dental for additional information at 800-524-0149. MCC's Group Number is 9253.