



# GEBA has **NEW** Dental coverage features for your whole family!



**GEBA Annual Open Season: November 14 - December 19, 2022.  
Enroll at [www.GEBA.com/OpenSeason](http://www.GEBA.com/OpenSeason)**

## *New* for 2023

- Both Plans: **Teeth whitening** services **added**.
- Enhanced Plan: Orthodontia benefit **increased to \$3,000** for dependent children to age 19 with **no waiting period**.
- Standard Plan: **\$1,000 orthodontia** benefit **added** for dependent children to age 19 with **no waiting period**.

## Something to *smile* about

GEBA's Dental coverage with **Delta Dental** makes it easier to keep up with preventative care *and* cover major dental expenses.

### Why choose GEBA coverage?

- Affordable rates, with no deductible
- Preventive care beyond two cleanings per year – e.g. exams, X-rays, and no exclusions for pre-existing conditions
- Dependent child coverage up to age 26
- No waiting period for major dental care
- Maintain coverage even if you leave federal employment
- GEBA's superior customer service – a local team dedicated to serving our members

**Trust Earned.** The Government Employees' Benefit Association was founded in 1957 by NSA employees to provide insurance benefits to federal employees. Nearly 17,000 of your peers choose GEBA.

Call: (410) 657-8060 or (800) 826-1126

Email: [geba@geba.com](mailto:geba@geba.com)

1362 Mellon Road, #100, Hanover, MD 21076

## What are the Benefits and Features? - Benefit Summary<sup>1</sup>

For a full overview of our Dental plan and what it offers, visit [www.GEBA.com/dental](http://www.GEBA.com/dental)

Covered Services	Standard Plan <sup>2</sup>	Enhanced Plan <sup>2</sup>
<b>Maximum benefit</b> per person per calendar year	\$4,000	\$35,000
<b>Diagnostic and Preventive Care</b> <ul style="list-style-type: none"> <li>Oral exams and cleanings – twice in any 12-month period</li> <li>Bitewing X-rays – twice in any 12-month period</li> <li>Full mouth X-rays – once in 3-year period</li> <li>Fluoride treatments – twice in any 12-month period up to age 19</li> <li>Sealants - up to age 14</li> <li>Space maintainer - up to age 14</li> </ul>	PPO - 100% Premier <sup>3</sup> - 100% Out of Network <sup>4</sup> - 100%	PPO - 100% Premier <sup>3</sup> - 100% Out of Network <sup>4</sup> - 100%
<b>Basic Care</b> <ul style="list-style-type: none"> <li>Anterior composite “white” fillings</li> <li>Oral surgery – extractions and surgery</li> <li>Endodontics – pulpal therapy and root canal fillings</li> <li>Periodontics – treatment of gums</li> </ul>	PPO - 50% Premier <sup>3</sup> - 50% Out of Network <sup>4</sup> - 50%	PPO - 80% Premier <sup>3</sup> - 60% Out of Network <sup>4</sup> - 60%
<b>Major Dental Care</b> <ul style="list-style-type: none"> <li>Crowns, inlays<sup>5</sup>, and onlays<sup>5</sup></li> <li>Implants – two implant annual maximum (per insured)</li> <li>Prosthodontics – construction or repair of fixed bridges, partial or complete dentures</li> <li><b>NEW!</b> Teeth whitening</li> </ul>	PPO - 35% Premier <sup>3</sup> - 20% Out of Network <sup>4</sup> - 20%	PPO - 50% Premier <sup>3</sup> - 40% Out of Network <sup>4</sup> - 40%
<b>Orthodontics</b> – up to age 19	PPO - 50% Premier <sup>3</sup> - 50% Out of Network <sup>4</sup> - 50% <b>NEW!</b> \$1,000 per person maximum lifetime	PPO - 50% Premier <sup>3</sup> - 50% Out of Network <sup>4</sup> - 50% <b>NEW!</b> \$3,000 per person maximum lifetime

FOR COMPARISON USE ONLY. This comparison is only a brief summary of benefits offered under each plan. Complete details, including limitations and exclusions, are detailed in the policy. In the event of discrepancies, the policy shall govern.

<sup>1</sup> Not available in Alaska.

<sup>2</sup> Delta Dental dentists accept Delta Dental's Maximum Plan Allowances or their charged fees, whichever is less, as the full payment for services. This is known as Delta Dental's Allowed Amount. A Maximum Plan Allowance is the amount payable for a service provided by Delta Dental dentists and non-Delta Dental dentists. It is calculated by Delta Dental from claim charges submitted on a regional basis for a given service by dentists of similar training within the same geographical area. Delta Dental blends the claim charges with dentist fee information from a number of other sources, including dentist fee filings, using various factors, subject to regulatory limitations and adjustment for extreme difficulty or unusual circumstances. The dollar amount of the Maximum Plan Allowance for services may be different depending upon the network in which the dentist participates. Plus, dentists who do not participate in Delta Dental's networks (non-Delta Dental dentists) may not accept Delta Dental's reimbursement as payment in full, and may charge you for the balance of the bill.

<sup>3</sup> Enrollees who receive services from Premier dentists will have to pay the difference between the contracted fees at the Premier network level and the amount covered by Delta Dental.

<sup>4</sup> Based on contracted fees at the PPO network level, you will have to pay the difference between the total fee charged and the amount covered by Delta Dental.

<sup>5</sup> Delta Dental of Pennsylvania does not require pre-authorization for services. Delta Dental strongly recommends enrollees ask their dentists to seek a pre-treatment estimate (also known as a predetermination of benefits) before receiving services that are expected to exceed \$300.



### Underlying Insurance Provider

GEBA dental insurance is provided by **Delta Dental of Pennsylvania**, the nation's largest and most experienced dental benefits carrier with a network of more than 348,000 dentist locations.

Delta Dental is passionate about people and oral health. Since 1954, Delta Dental's core purpose has been the advancement of the oral health of consumers through dental insurance.

### Looking for a Dentist?

To get the greatest value from GEBA, we encourage you to use a Delta Dental PPO<sup>SM</sup> provider. If you select a Premier<sup>®</sup> provider or an out-of-network provider, your services will be covered, but your out-of-pocket costs may be higher than for the dentist in the PPO network for the same covered benefits.

To see if your current dentist participates with Delta Dental, visit [deltadentalins.com](http://deltadentalins.com) and click “Find a Dentist”. In-network providers have been screened by Delta Dental to ensure they meet its professional standards for quality of care and service.

## Who Can Enroll?

All federal employees and retirees, active and retired military, and their families are eligible for GEBA membership. You can select a plan that includes coverage for your spouse/domestic partner, and/or [dependent child\(ren\) up to age 26](#).



### Sponsored Family Members (Extended Family)

You're family is *our* family. Extended adult family members include siblings, children, parents, in-laws, grandparents and grandchildren. For more information, visit [www.GEBA.com/family](http://www.GEBA.com/family).

## Choose GEBA

### Easy Enrollment Options! GEBA Open Season: November 14 - December 19, 2022

1. Apply online at [www.GEBA.com/OpenSeason](http://www.GEBA.com/OpenSeason) through our secure application. Your information is protected, it takes just minutes, and we receive your application immediately.
2. If you prefer, you may complete and sign the GEBA Dental Coverage Enrollment Form then mail, email, or fax the completed application to GEBA.

### Your NEW coverage will take effect on January 1, 2023.

You will receive your ID card from Delta Dental. Your dental card will only have the GEBA member's name listed. Since benefits are payable annually, participants must commit to one full year of premium payments upon enrollment. Plan cancellation may only occur during annual Open Enrollment or due to a life changing event.

If you currently have a FEDVIP plan, **you must cancel** your coverage by **December 14, 2022** at [www.benefeds.com](http://www.benefeds.com).

## Frequently Asked Questions

### How do I access my policy information?

Visit [deltadentalins.com](http://deltadentalins.com) and register online to:

- Print your dental card
- Track your claims
- View your personal benefits information
- Find a dentist in network

### How are benefits coordinated with my spouse's dental insurance company or health care plan?

It is important to coordinate benefits in cases where both spouses have family dental coverage, or have two plans that cover some dental work through their respective employers or outside sources. Delta Dental coordinates with the other insurance company to make sure that the combined payments on a claim do not exceed the total amount the dentist has agreed to accept from Delta Dental. The primary insurer pays benefits first and the secondary carrier pays next. Any amount not paid by the primary carrier may be paid in part or in whole by the secondary carrier. The dental plan of the person submitting the claim is the primary carrier. For dependents, the primary carrier is determined based on the "birthday rule." The spouse whose birthday comes earliest in the year will have his or her dental plan designated as the primary carrier for purposes of covering their children. If you have dental insurance through your health care plan, it is always considered the primary insurer.

### Are pre-existing conditions covered?

Delta Dental provides benefits for pre-existing conditions as part of its focus on promoting good dental health. Delta Dental will take responsibility for any procedures beginning after the effective date of a participant's coverage. However, some procedures, if started prior to enrolling in Delta Dental's Plan, may be the responsibility of the previous carrier.

### How does visiting an out-of-network dentist affect my out-of-pocket costs?

You have the choice of your dentist. Your out-of-pocket costs are affected by the dentist's participation in the Delta Dental network. Your best value is with the dentist who participates in the PPO network. The PPO network accepts the lowest pre-negotiated rates, saving you money.

#### Out-of-Pocket Cost Savings Example

Basic Cleaning	Delta Dental PPO Dentist	Delta Dental Premier Dentist	Out-of-Network Dentist
Fee Charged by Dentist	\$75	\$75	\$75
Pre-negotiated rate	\$45	\$55	None
Delta Dental Payment (PPO Allowance)-100% at pre-negotiated rate	\$45	\$45	\$45
Patient Share	\$0	\$10	\$30

