

Adult and Adolescent Orthodontia

The following guide is designed to help both members and providers understand and apply the **Adult and Adolescent Orthodontia Benefit** provided by the **Suffolk County Municipal Employees Benefit Fund** and processed through by **ASO, Inc. the Fund's Third-Party Administrator & Dental Consultant**. Please note, on behalf of the Board of Trustees, the Fund is the insurer who determines the level of benefits and ASO processes all pre-determinations, claims and payments.

Total Benefit

\$2,995 for a standard 24-month case of Active Treatment

- \$1,995 paid by the Fund (Maximum **Lifetime** Allowance)
- \$1,000 paid by the member (*over a 20-month period at \$50 per month*)*
 - Plus any additional Passive Treatment at an agreed to price limit of \$25 per month

In-Network Providers Coverage

Lifetime Maximum Payment by Fund - \$1,995 through ASO, Inc:

- 1) First, obtain a pre-determination from ASO. Adult cases must have a severe malocclusion and/or functional problem for approval.
 - a) Cosmetic cases are **NOT** included or benefited
- 2) Diagnostic and Appliance Insertion - up to \$595
 - a) Includes Study Models, Panorex and/or Photos
- 3) Active Treatments up to 14 months - up to \$100 per month

Payment Responsibility by the Member:

- 1) Active Treatments for months 1 – 20 at \$50 per month (*\$1000 co-pay*)*
- 2) Active Treatments for months 21 – 24 at “No Charge”
- 3) Active Treatments after 24 months at \$100 per month
- 4) Passive Treatment, with **Basic Retainer** at \$25 per month
 - a) *Members are responsible for any additional costs for other than the basic retainer.*

Out-of-Network Providers

Members who use non-participating orthodontists will be responsible for the difference between the plan allowance in the Fund's Dental Fee Schedule for “Non-Participating Providers” and the actual dental charges.

Dual Members

Members who have coverage at the Active level and are married or registered Domestic Partners of another Fund member are eligible for the following:

- 1) Up to an additional \$1995 Lifetime Maximum for the second member, this may cover the \$1,000 co-pay, office visits exceeding 24 visits and/or Passive Treatments, if any.

Certain exclusions apply for Dual Members if one member is receiving the “No-Cost” Basic Retiree Plan. Call the Fund for limitations.

Additional Assistance is Only a Phone Call Away!

For questions regarding **benefit coverage** or to file an appeal, call the **Fund Office** at:

631-319-4099, press “0” and ask for Linda.

For questions about **pre-determination and claims processing**, call **ASO, Inc.** at:

1-800-626-5562

Disclaimer: To the extent this benefits presentation describes any benefit provided by this Fund, which is already described in the Fund's comprehensive Benefit Reference Guides, or as amended in subsequent writings by the Fund, or a policy of insurance (e.g., life insurance), the language of the 2008 Benefit Reference Guide, as amended, and/or the group insurance contract, which specify the exact benefits provided, will govern in the event of inconsistency between it and the language of this presentation.