QUESTIONS AND ANSWERS ABOUT CIGNA DENTAL INSURANCE

1. **If you now have dental insurance through a COBRA plan, can you enroll in MAR’s plan without waiting for the COBRA to expire?** Yes. If you transition from your COBRA plan to ours with no break in coverage, there is no waiting period before full benefits are available. Cobra coverage is usually less expensive, so you should stay on COBRA as long as you can. Your new plan will be effective on the first day of the month after your COBRA coverage ends. If your COBRA coverage will end on the 15th of the month, you can opt not to pay your final ½ month premium. We can begin your plan effective on the 1st day of that month. (Please make sure you notify the company that handles your COBRA payments that you will cancel effective with the last day of the previous month and not pay the final ½ month so they do not cancel your COBRA plan for non-payment.)

2. **Can your spouse or domestic partner obtain dental insurance even when he/she cannot share in your health insurance?** Yes. The two are not related.

3. **Does coverage include Orthodontics?** No. This gives our group a lower premium.

4. **What is the $25 -$75 Deductible?** The deductible is $25.00 per person. Class II, Class III and Class IV services are subject to a deductible each contract year. This deductible does not apply to Class I services. The deductible will never exceed $75 for a family during a contract year. **How is the $1,500 coverage figured?** It is your dental charge that is covered by the insurance but not the part you must pay. For instance, if you have a $100.00 procedure and the insurance pays $80.00, only the $80.00 is deducted from your $1,500.00 allowance not the full $100.00 fee.

5. **Can I use my dental insurance outside of Maine?** Yes. If you visit a dentist outside of Maine, you may be required to pay the dentist “up-front,” then mail the paid bill with a claim form to CIGNA and you will be reimbursed the amount covered by the policy. You can obtain a claim form from our office. CIGNA has a vast network throughout the United States.

6. **Who is eligible for coverage?** All MAR members and their dependents (which are defined as: Spouse or domestic partner; unmarried, dependent children through age 25 (they lose coverage at the end of the month of their 26th birthday); and incapacitated dependent children, regardless of age). If you are enrolling one eligible dependent, all eligible dependents must be enrolled unless they are covered elsewhere. Note: It is your responsibility to notify MAR when your dependents age-out of the plan, are no longer dependent on you, or obtain insurance through their own employment. The MAR office will need to change your dental plan and adjust your premiums through your retirement check and make the change in your plan. YOU MUST NOTIFY OUR OFFICE, CIGNA CAN ONLY ACCEPT CHANGES THAT ARE PROCESSED THROUGH OUR OFFICE.

7. **If a spouse is still working and has a job-benefit dental insurance plan, can that spouse be enrolled in the retirees’ dental plan?** Yes. The spouse can be enrolled on both plans. Benefits will be coordinated with the other insurance company. The spouse’s plan will be the primary carrier on their procedures. If the spouse decides not to join at the same time, they will be eligible to join the MAR plan within 60 days of when their coverage from the other employer ends or may wait to join during an annual Open Enrollment Period.

8. **Can you choose between Class I, Class II, Class III or Class IV coverage levels?** No. You get all four types of coverage with your dental plan. Class I Coverage starts immediately on the first day your plan is effective and Class II, Class III and Class IV will start six months later, unless you are coming off a COBRA plan or another full coverage dental plan and there is no break between both plans. If so, the six-month waiting period is waived.

9. **How much does it cost to join the Maine Association of Retirees and be able to purchase the dental insurance and how do I pay my dues and premiums?** Dues for MAR membership are $1.50 per month which will be deducted from your pension check along with your CIGNA Dental premiums. These dues are among the lowest of any public retiree organization in Maine.
10. **What does PPO mean?** CIGNA participating PPO dentists agree to fee schedules as payment in full. These schedules provide deeper discounts that result in greater savings to groups and enrollees. PPO dentists are prohibited from billing and collecting fees in excess of the agreed upon schedule. CIGNA Dental PPO plan allows enrolled patients to visit any dentist but offers additional savings when visiting a PPO network dentist. Ask your dentist if they are a PPO provider, if not, you may be required to pay additional out of pocket costs. To find out if your dentist is a PPO provider go to the CIGNA website:  [www.Cigna.com](http://www.Cigna.com)

11. **When can I enroll in CIGNA Dental?** You can enroll within 60 days of becoming a member of MAR, within 60 days after a “Qualifying Event,”* or without a “Qualifying Event” during one of the Open Enrollment periods.**

12. **How do I pay for my insurance?** Your premium for CIGNA Dental will be automatically deducted from your pension check. You do not need to send in any monies to “start” your policy as long as your application is received in our office before the 10th of the month. We will let you know if you will need to send a check in based on processing deadlines.

13. **How long does my insurance stay in effect?** The insurance will remain in effect until you notify MAR that you wish to cancel and make changes due to a Qualifying Event.* or without a qualifying event, you must wait until the next Open Enrollment Period to make additions, deletions or cancel your plan.

14. **I moved, do I have to contact CIGNA Dental directly?** No, when you notify us of your address change, we will notify CIGNA Dental.

*Qualifying Events: Birth, Death, Adoption, Change in Employment Status, Change in Dependents Employment Status, Divorce, Marriage, Loss of COBRA Coverage, Loss of other Dental insurance coverage.

** Open Enrollment period: Held once a year, effective date of changes will be on February 1st. This Open Enrollment period is the only time that you have the opportunity to make any needed changes to your dental plan (adding or dropping dependents) without having a “Qualifying Event.” If you elect not to make any changes to your plan at Open enrollment, you are automatically re-enrolled for the next 12 months and cannot drop out or make any other changes without a “Qualifying Event”