

Please review our full set of out-of-network (OON) reimbursement levels and premium impact. These plan design options give employers more flexibility in choosing the plan that best suits their employee base while employing cost controls.

## Advantage 900

- slight exposure for OON treatment = higher premiums -

For employers based in areas, or employing large numbers of people in areas, where DCPG offers a solid network still growing toward its potential, **Advantage** OON reimbursement ensures that members who do not choose network dentists are subject to minimal balance billing. The premium price reflects the fact that while most members will choose in-network dentists, a significant portion will go out-of-network, resulting in higher claims costs.

## Defined 800

- the compromise = slightly more exposure for OON treatment plus slightly higher premiums -

For employers based and employing most employees in an area with an established network, the **Defined** OON reimbursement is a reasonable compromise for employees who choose to go out-of-network for dental services and whose decisions put upward pressure on the premium for employers and co-workers sharing the cost of the premium.

## Choice

- dollar value of OON treatment is below fee schedule, providing a strong incentive for members to select a network dentist = lower premiums -

For employers based in an area with an established network and whose members outside of the area have strong network access, establishing a **Choice** OON reimbursement level (below fee schedule) is a viable strategy for encouraging in-network service. Although members can still go out of network, there is a strong disincentive for doing so.

## Match

- dollar value of OON treatment is equal to in-network treatment and members who go OON have greater exposure to balance billing = lower premiums -

For employers based in an area with an established network and whose members outside of the area have acceptable network access, setting OON reimbursement at **Match** (or equal to fee schedule) enables members who still opt for out-of-network providers to receive the same dollar value of benefit coverage for comparable services as the member who selects an in-network dentist. However, going out-of-network does expose the member to balance billing. The degree of balance billing would depend upon the full billed charges of the OON provider.

Setting the OON reimbursement at fee schedule also ensures that the employer and any employee sharing the cost of the premium are not absorbing the additional costs that result from a minority of employees choosing to seek treatment from out-of-network dentists despite ample opportunity to remain in network. Often this approach to OON reimbursement encourages dentists who have refrained from joining the network to do so, increasing every member's in-network provider options

DCPG's ability to offer a full set of reimbursement levels is the outcome of thoughtfully and aggressively building strong provider networks in newer markets rather than settling for "acceptable" networks or subsidizing chronically weak networks through high out-of-network reimbursement --eventually recouped through higher and higher premium renewals.



**Our dedication to exceptional service and focus on building strong provider networks is a sustainable business model in the face of rapid,extensive change.**

**No competitor can match us in service experience or in network development, and we do not expect this competitive advantage to be any less advantageous moving forward.**