



WYOMING



How Much Will I Owe For My Dental Care?

When it comes to paying for dental treatment, no one likes surprises. Asking for a predetermination *before* your procedure lets you know how much it may cost based on your dental coverage.

What is a predetermination?

A predetermination is a cost estimate that shows:

- Whether the treatment is covered or not
- Any deductible or maximum amounts
- How much your benefits administrator will pay
- How much you'll be responsible to pay
- Treatment options covered by your dental plan

Remember, a predetermination is not a guarantee of payment—it's just an estimate of what you can expect to owe.

When should you ask for a predetermination?

If you need a more expensive or extensive treatment, consider asking your dentist for a predetermination first. Examples include procedures such as crowns, bridges, wisdom teeth removal or periodontal treatment. Some dental services may not be covered by your plan, or your coverage may be limited.

How do you get a predetermination?

Your dentist will send a predetermination request to your benefits administrator. The information in the request is carefully compared to your coverage details. Once your estimated benefits are calculated, both you and your dentist get a copy of the predetermination, showing what you can expect to owe out of pocket.

Making your treatment decision

After you get the predetermination, you can decide if you want to get the treatment, or talk about options with your dentist.

continued ...

Understanding the cost after your treatment

After your dental treatment is done, you'll get an Explanation of Benefits (EOB). Your EOB statement shows many details including:

- The services that were performed
- The amount billed by the dentist
- The amount paid by your benefits administrator
- The portion of your bill not covered by your plan

What you may owe

This example EOB shows where to find the amount you may owe for treatment. For example, you may have coinsurance, which is a portion of the charge that is your responsibility. Your dentist may send you a bill for the amount not paid.

 WYOMING		DENTAL EXPLANATION OF BENEFITS KEEP FOR YOUR TAX RECORDS		YourWyoBlue.com DENTAL CUSTOMER SERVICE P.O. BOX 69420 HARRISBURG PA 17106-9420		
Subscriber: JAMIE JONES		ID Number: 012345678900	Page: 1 of 3			
Patient: JOSH JONES		Claim Number: 01234567890	Date: 06/06/19			
Provider: STEPHANIE SMITH DDS (012345678)						
PROCEDURE DESCRIPTION PROCEDURE CODE *TOOTH DESCRIPTION*	SERVICE DATE (S)	PROVIDER CHARGE	ALLOWED AMOUNT	AMOUNT PAID	AMOUNT NOT PAID	REMARKS
SCALING/PLANING 4 + TEETH D4341 *LL*	05/14/19	275.00	186.00	139.50	46.50* 89.00	COINSURANCE Q1030
SCALING/PLANING 4 + TEETH D4341 *UL*	05/14/19	275.00	186.00	139.50	46.50* 89.00	COINSURANCE Q1030
TOTALS		550.00	372.00	279.00	271.00	
		1	2	3	4	

You can view or print a copy of our Health Insurance Portability and Accountability Act of 1996 (HIPAA) Notice of Privacy Practices by visiting our website at YourWyoBlue.com.

If you are covered by more than one health benefit plan, you should file all your claims with each plan.


WYOMING

HAVE A QUESTION?
 PLEASE CALL **1-844-653-4057**
 Service for the Deaf via TTY Equipment
 is available at 711.

THIS IS NOT A BILL
 DN121319

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Current Dental Terminology © American Dental Association

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- 1. Provider Charge**—The amount the dentist billed for the service.
- 2. Allowance**—The amount your plan approves for each procedure. Example: The rate that has been negotiated with in-network dentists.
- 3. Amount Paid**—The amount your dental plan will pay.
- 4. Amount Not Paid**—The portion of the bill not covered by your plan. This can include coinsurance, deductible, copayment amounts or other amounts. You may be responsible to pay the dentist the costs in the “Amount Not Paid” column.

Still have questions?

If you still need help understanding your costs, contact (insert info.)