

Health Care Reform

The Patient Protection and Affordable Care Act (ACA) also known as Health Care Reform (HCR) has had a significant impact on the dental industry. The ACA/HCR has expanded the availability of dental insurance coverage for people 18 and younger.

Effective 1/1/14, the ACA mandated Qualified Health Plans (QHPs) must cover “Essential Health Benefits” (EHBs) for individuals and small groups only.

Each state is required to use an existing health plan as a benchmark for the benefits that must be included in the ACA-compliant QHPs sold on the **Marketplace** (aka the Exchange). **Florida uses The Federal Employee Dental Vision Insurance Plan (FEDVIP).** The pediatric dental benefits from **FEDVIP** are considered **EHBs** in Florida.

EHBs Include:

- Pediatric dental benefits for children age 0 through the end of the calendar year in which they turn age 19
- Maximum Out-Of-Pocket (MOOP) cost share (once met all covered services are paid at 100% of plan allowances.) 350.00 / \$700.00 MOOP
- No annual maximum



Florida Blue 
In the pursuit of health®

Mandated Pediatric Dental Benefits

Type 1 Services:

Preventive and diagnostic*

- Clinical and oral examinations
- Radiographic images
- Dental prophylaxis, topical fluoride and other preventive services

Type 2 Services:

Basic restorative services*

- Restorative – including crowns
- Periodontics
- Endodontics
- Oral surgery
- Dental prosthetic maintenance

Type 3 Services:

Major restorative services*

- Prosthodontics (Removable)
- Orthodontics
- Implants

**including but not limited to*

Florida Combined Life Insurance Company, Inc. (FCL) strongly recommends verifying member's eligibility and benefits prior to rendering services.

Orthodontic and implant services will be covered only when determined to be medically necessary, and pre-authorizations are required

The following bulletins give a detailed overview of FCL's ACA/HCR plans. The first chart indicates the schedule of benefits each particular plan uses and the network utilized.

The second outline gives a summary of pediatric and adult plan coverage and benefit allowances. If you are in doubt about your participation in a particular plan or which schedule of allowance to use contact Customer Service at 866 445-5148.