

# DENTAL MEMBER FAQ



Got a question? We are here to answer! If you don't see your question here, please contact our Customer Services Department at 1-800-927-9197.

## Q. Where do I mail a claim?

A. Mail claims to: Mutual of Omaha PO Box 211472  
Eagan, MN 55121

## Q. Where can I get information about my benefits?

A. Through your secure access to [mutualofomaha.com/dental](https://mutualofomaha.com/dental), or by calling Customer Service at 1-800-927-9197.

## Q. How can I tell what I owe for dental services?

A. The amount that you owe will be detailed on the Explanation of Benefits that you may access your Explanation of Benefits when you log in to the secure member homepage of this web site.

## Q. How will I get reimbursed?

A. An in-network dentist will file your claim directly and be reimbursed directly by us. You may be responsible for any co-insurance, co-payment, and/or deductible due the dentist. If you choose to visit a non-participating dentist, you may be responsible for all payments and charges to the dentist at the time of treatment. You may also be responsible for submitting the claim form to us. In most cases, we will send reimbursement for the covered services rendered by a nonparticipating dentist directly to you. Claim forms can be printed from the Forms section of this web site.

## Q. Do I need pre-approval for major dental work?

A. We do not require a pre-approval for services received, but we recommend a pre-treatment estimate of services for any non-emergency treatment plan of \$300 or more. This allows us to let you and your provider know, before the procedure is performed, if it is a covered procedure and what the reimbursement for the covered procedure will be. This helps eliminate confusion before dental work is performed. Please discuss this option with your dentist.

## Q. Does my plan cover cosmetic dentistry and orthodontics?

A. Cosmetic services are not covered under Mutual of Omaha's group dental plans. Orthodontia is a benefit option that is offered as a service under many plan options. You may contact our Customer Services Department at 1-800-927-9197 to review your group's dental benefits.

## Q. What if I am unhappy with the dental care I received or wish to file a grievance?

A. You are welcome to file a complaint with Mutual of Omaha concerning any quality-of-care issues you may have. Please detail your complaint in writing and mail to: Mutual of Omaha Attn: Appeals and Grievances PO Box 211472 Eagan, MN 55121

**Q. How do I find a Mutual of Omaha participating dentist or check to see if my current dentist is a Mutual of Omaha participating dentist?**

**A.** You can view a listing of participating dentists online by visiting the Find a Dentist section of this web site or call our Customer Services Department at 1-800-927-9197.

**Q. What are the advantages of visiting a participating dentist?**

**A.** The main advantage is the cost savings to you. Our network dentists have agreed to accept our allowances as payment in full for the services provided under your plan. Another advantage is that a participating dental office will file all claims for you, and we will pay the dentist directly. You are only responsible for any deductible, co-insurance, or non-covered service.

**Q. My dentist is not a participating dentist. Can I still visit him or her?**

**A.** Yes, under our plans you have the freedom of choice. Seeing an out of network dentist will potentially be more costly because they have not agreed to accept our payment allowances. You will be responsible for the difference between what your Mutual of Omaha plan covers and what the non-participating dentist charges.

**Q. Who can I notify about inaccurate provider information?**

**A.** If you see a provider that needs to be updated, please let us know either by emailing us at [providerdirectory@mutualofomaha.com](mailto:providerdirectory@mutualofomaha.com) or by calling us toll-free at 1-800-752-1547.

**For Connecticut Residents:** We are committed to offering a robust provider network that maximizes the number of dentist available to ensure all covered services will be accessible without unreasonable delay to its subscribers and their eligible dependents. Mutual of Omaha uses software to run provider accessibility and availability mapping within a geographic region. This permits a determination of the number of providers by area of practice and geographic segment (city, county, etc.) and a corresponding visual representation of this distribution, which identifies where further targeted provider recruitment may be necessary. In addition, we entertain input from subscribers, groups, and carriers who request that certain providers be added to the network or requires a targeted recruitment.

Our networks are required to certify their sufficiency, including time and distance standards and provider-to-enrollee ratios, by comparing our covered membership for all areas to the participating provider's location and specialty.

Providers participating in our networks are credentialed and recertified according to stringent guidelines, which require a thorough check of malpractice history, verification of licensure, verification of adequate malpractice coverage, certification of education, regular monitoring against government sanction list and other quality checks upon initial credentialing and recertification.

**Q. How do I change dentists?**

**A.** Under our plans you simply make an appointment with your new dentist of choice.

**Q. Do I need to submit a claim after receiving treatment or will my dentist handle it?**

**A.** If you receive treatment from a participating dentist, they will file all claim information for you. However, you may be responsible for submitting claim information if you visit a non-participating dentist. Your employer should be able to provide you with a claim form or you can print one from our web site at [MutualofOmaha.com](http://MutualofOmaha.com). Claim forms should be mailed to: Mutual of Omaha PO Box 211472 Eagan, MN 55121

**Q. Where can I submit a change of address?**

**A.** Inform your Human Resources/Benefits Department of your new information. They will provide us with the necessary information to make the changes in our systems.

**Q. I've recently married. How do I add my new spouse to my plan?**

**A.** Contact your Human Resources/Benefits Department and inform your employer that you would like to add a dependent to your coverage.