



How your new dental plan covers work in progress

If you're new to the Kentucky Employees' Health Plan (KEHP), you may have questions about how Anthem will cover dental work you may have already started under a different plan. Here are examples to help explain the process.

Example 1 — Standard dental services such as dentures, crowns, bridges, and root canals

Suppose your dentist gave you a cost estimate for a crown. At the time, you were covered by your former insurance company. In a few weeks, you have an appointment to have the crown completed, but now you're covered by Anthem.

In this case, Anthem will honor your former plan's preestimate for the service if your dentist is in your new Anthem plan's network. Your claim will be paid based on when your dental work in progress is finished.

If your dentist is not in your new plan's network, you may be responsible for dental services that started before the date your Anthem coverage became active.

Example 2 — Orthodontic services such as standard braces and Invisalign®

If you or your child are in the middle of an active orthodontic treatment, like having bands placed, your orthodontist's office will need to give us a copy of the original claim. It should include the:

- Treatment type (procedure number).
- Total fee for treatment.
- Number of months treatment will take place.
- Orthodontist's signature.

The payment amount is based on the number of months of active treatment that are left. If your former plan paid any part of the treatment cost before you changed to your new plan, this may be deducted from the amount Anthem covers.



You can roll over \$350 each year you qualify — up to a maximum of \$1,500.

We're ready to help

If you have questions about your dental benefits, call **844-402-KEHP (5347)** to talk with an Anthem representative, Monday through Friday, from 8 a.m. to 8 p.m. ET.