Do you have questions about dental health?
At the AGD’s Web site, you can search more than 300 oral health topics, post a dental question, sign up for e-newsletters, find an AGD dentist, and more.
Visit us at www.agd.org.

What is the best dental insurance plan for me?
Although there is no perfect dental insurance plan, some plans will be better than others for you and your family. Dental insurance plans primarily differ in how much you have to pay. Although no plan will pay for all of the costs associated with your dental care, some plans will cover more than others.

With any dental insurance plan, you will pay a basic premium, usually monthly, to buy the dental insurance coverage. In addition, there are often other payments you must make. These payments will vary by plan, but they are essentially deductibles, copayments, and coinsurance.

What questions should I ask?
Consider these questions when selecting a dental plan:
• How much will it cost me on a monthly basis?
• Are there deductibles I must pay before the insurance begins to help cover my costs? After I have met the deductible, what part of my costs are paid by the plan?
• Which dentists are part of the plan?
• Where will I go for care? Are the offices near where I work or live?
• If I use dentists outside of a plan’s network, how much more will I need to pay to receive care?

If you have access to dental insurance, it’s a good idea to elect coverage. But if you can’t get dental coverage through work, you might be able to buy an individual dental insurance policy.

What types of dental plans are available?
Dental insurance plans usually are described as either indemnity (fee-for-service) or managed care. Indemnity and managed care plans differ in their basic approach. The major differences concern choice of providers, out-of-pocket costs for covered services, and how bills are paid. Usually, indemnity plans offer a greater choice of dentists than managed care plans. Indemnity plans pay their share of the costs of a service only after they receive a bill. Managed care plans have agreements with certain dentists to give a range of services to plan members at reduced cost. In general, you will have less paperwork and lower out-of-pocket costs if you select a managed care-type plan and a broader choice of dentists if you select an indemnity-type plan. Managed care plans are dental PPOs, POSs, and dental HMOs.

Some dentists, called non-participating or insurance-free dentists, do not accept any insurance in their practice.

What is a dental discount plan?
A number of companies offer dental discount plans. For a monthly or annual fee, you get access to a network of dentists who will work for discounted rates. However, there are no guarantees that your dentist will provide services for the discounted rate for the entire term of your plan membership. Be sure to check with your dentist to make sure he or she is a member. You also may want to talk with your dentist about other financing arrangements. Many dentists are willing to work with your financial constraints.

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