



DENTAL INSURANCE

Provided by

aetnasm





Postdoctoral Trainee Benefits Program

AETNA Dental Plans	Total Monthly Cost	VUMC Contribution	Postdoc Contribution
HMO Dental Plan			
Postdoc	\$20.48	\$20.48	\$0
Postdoc + Spouse	\$40.33	\$40.33	\$0
Postdoc + Child(ren)	\$51.49	\$51.49	\$0
Postdoc + Family	\$76.71	\$76.71	\$0
PPO Dental Plan			
Postdoc	\$37.16	\$37.16	\$0
Postdoc + Spouse	\$73.13	\$73.13	\$0
Postdoc + Child(ren)	\$93.31	\$93.31	\$0
Postdoc + Family	\$139.13	\$139.13	\$0





Postdoctoral Trainee Benefits Program				
Plans	VUMC Contribution	Postdoc Contribution		
Voluntary SunLife Vision Plan				
Postdoc	\$0	\$8.93		
Postdoc + Spouse	\$0	\$17.86		
Postdoc + Child(ren)	\$0	\$19.64		
Postdoc + Family	\$0	\$28.57		
Life/AD&D/Long-Term Disability**	\$12.05	\$0		

^{**} Paid for by VUMC





Postdoctoral Trainee Benefits Program

Aetna Dental HMO

Aetna Dental HMO				
Core Benefits	In-Network			
Annual Deductible	None			
Annual Benefit Maximum	Unlimited			
Preventive/Diagnostic Care Routine Exams Teeth Cleanings (Prophylaxis) X-rays	No Charge No Charge No Charge			
Basic Procedures Fillings Endodontics Periodontics Oral Surgery	\$22 - \$40 Copay \$4 - \$380 Copay \$23 - \$300 Copay \$4 - \$117 Copay			
Major Procedures Crowns Bridgework Dentures	\$195-275 Copay \$195-275 Copay \$10 - \$403 Copay			
<u>Orthodontia</u> Adolescent Adult	\$1,945 Copay \$1,945 Copay			

For more detailed plan design information go to: https://clients.garnett-powers.com/pd/vumc/documents/





Postdoctoral Trainee Benefits Program

Aetna Dental PPO - \$1500 Annual Max Benefit

Core Benefits	In-Network	Out-of-Network (MAX Plan)
Annual Deductible	\$0 per individual \$0 per family	\$50 per individual \$150 per family
Preventive/Diagnostic Care Routine Exams Teeth Cleanings (Prophylaxis) X-rays	0% 0% 0%	30% 30% 30%
Basic Procedures Fillings Endodontics Periodontics Oral Surgery	20% 20% 20% 20%	40% 40% 40% 40%
Major Procedures Crowns Bridgework Dentures	50% 50% 50%	50% 50% 50%
Orthodontia (child only) Adolescent (to age 20) Adult	50% (\$1,500 Lifetime Limit) Not Covered	50% (\$1,500 Lifetime Limit) Not Covered

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Accessing the Out-of-Network Tier

An example of how seeking Out-of-Network services can impact your out-of-pocket costs:

- Porcelain Crown on a molar We will estimate that the usual, customary and reasonable charge that Aetna allows is \$800
- Per the out-of-network benefit structure, you will pay 50% (your coinsurance) toward that crown, which would be \$400
- In addition, if the out-of-network dentist performing your crown services charges more than what is considered usual, customary and reasonable, you will pay the \$400 **plus** any additional amount that the dentist wishes to charge. So, if the dentist charged \$900 for the crown in total, you would pay a total of \$500 for the crown, which includes the extra \$100 that the dentist charged above what is considered usual, customary and reasonable
- Using the out-of-network tier costs you more because the dentists do not discount their services per a provider contract, whereas those contracts do reduce your out-of-pocket costs in the In-Network PPO tier
- When you access care out-of-network, you and the insurance carrier incur more costs, consequently affecting the overall pricing of the plan