

Dental Insurance Fact Sheet

Seeing a dentist twice a year can help keep your whole body healthy, not just your teeth. A dental checkup can find over 120 illnesses, such as high blood pressure, asthma and heart disease. And, it can give you a brighter smile!

How to get HealthCare.gov dental coverage

When you complete your HealthCare.gov application and get your results, you can select a health plan that include dental coverage.

If you decide you want a stand-alone dental plan, you can choose one after you select your health plan.

*You can buy a dental plan through HealthCare.gov **only** when you enroll in a health plan at the same time.*

Dental coverage is available 2 ways

Through HealthCare.gov, you can get dental coverage as part of a health plan, or by itself through a separate, stand-alone dental plan.

Health plans that include dental coverage. With HealthCare.gov, dental coverage is included in some health plans. If a health plan includes dental coverage, you will pay one monthly premium for both. The premium shown for the plan includes both health and dental coverage.

Separate, stand-alone dental plans. In some cases, separate, stand-alone plans are offered. You may want this if the health coverage you choose does not include dental coverage, or if you want different dental coverage.

If you choose a separate dental plan, you'll pay a separate, additional premium.

Adult and child dental insurance

Under the health care law, dental insurance is treated differently for adults and children 18 and under.

Dental coverage for children is an essential health benefit. This means if you are getting health coverage for someone 18 or younger, dental coverage **must be available** for your child,

either as part of a health plan or as a stand-alone plan. *While dental coverage for children must be available to you, you do not have to buy it.*

Dental coverage is not an essential health benefit for adults. Insurers do not have to offer adult dental coverage.

Dental coverage is optional, even for children, so you don't need it to avoid paying a penalty for not having coverage.

If you have kids under the age of 18 who need dental coverage, and you have leftover tax credit you didn't use to help pay for the cost of your family's health insurance, it may be applied to the cost of pediatric dental insurance as long as:

the children are on your dental plan and

your basic health insurance doesn't include children's dental

There are two classes of dental plans: High and low coverage levels.

The high coverage level usually has higher premiums and lower copayments and deductibles. You may pay more every month but pay less when you see your dentist.

The low coverage level usually has lower premiums but higher copayments and deductibles. You pay less every month but pay more when you see your dentist.

Medicaid Dental Program

The Kentucky Medicaid Dental Program covers certain routine preventive and restorative services for children under age 21 who have full Medicaid eligibility. Medicaid does cover some type of dental care for adults.

Adults: Coverage for adults is limited, but includes:

- Oral exams
- Emergency visits
- X-rays, extractions
- Filings

Children: Coverage for children includes:

- Oral exams
- Emergency visits
- X-rays, extractions
- Filings for all ages
- Root canal therapy, crowns, sealants and braces (for severe circumstances) and must meet prior authorization criteria.
- Denture repair

Keep your smile bright!

Visit a dentist at least once every six months.

Brush your teeth at least two times a day

A soft-bristled toothbrush is a safe choice for most people.