

Understanding FEDVIP Dental Coverage

A selection guide for military retirees

On December 31, 2018, the TRICARE Retiree Dental Program (TRDP) will end. This affects all eligible retired uniformed service members and family members.

You have the option to select a new federal dental plan through FEDVIP (see below). The first chance to enroll will be November 12 through midnight EST on December 10, 2018. This coverage will take effect January 1, 2019.

What is FEDVIP?

The Federal Employees Dental and Vision Insurance Program lets you choose between several dental and vision carriers. Some plans offer supplemental benefits, such as vision coverage and other discount programs when you are enrolled. In 2006, GEHA was one of a select number of carriers originally chosen by the Office of Personnel Management to offer FEDVIP benefits.

Evaluate beyond the basics.

Use this guide to help you look beyond monthly premiums and basic cleanings when you're comparing dental plans. You'll want to take into consideration your current and future dental needs.

For example, consider a plan's maximum coverage amount. Are you or a covered family member going to need crowns or implants? If so, how much does the plan cover? Is there a waiting period for services?



DECODING FEDVIP DENTAL PLANS

Who's eligible for coverage?

- Most military retirees and their eligible family members will have the option to enroll in Self Only, Self Plus One, or Self and Family coverage.
- FEDVIP allows one enrollment per family, so choose the plan that best serves all of your covered family members' needs.
- Spouses, dependents and survivors are eligible even if the retiree does not enroll.
- Dependents qualify for coverage until age 21. Full-time students are qualified until age 23.

How should I evaluate my dental plan options?

- Look for plans with **preventive care coverage**. You will also want to understand whether plans have any deductibles, maximum benefit limits or waiting periods for certain services.
- Research a plan's **provider network** to make sure you have acceptable in-network options. If a plan's provider network is small, you may have to find a new dentist – or pay more out-of-pocket to visit an out-of-network dentist.

What do the different levels of dental coverage represent?

As you compare plans, you'll see charts that list different coverage levels for different classes of dental care, from A to D.

- (A) Preventive.** Exams, cleanings, X-rays and fluoride treatments.
- (B) Basic.** Fillings, sealants, oral surgery, periodontal cleaning and extractions.
- (C) Major.** Crowns, implants, bridges and dentures.
- (D) Orthodontic.** Braces, retainers and maintenance adjustments.

What do these terms mean?

- **Waiting period.** A length of time you must wait after enrollment until certain dental procedures will be covered.
- **Deductible.** The amount you'll pay out-of-pocket before your benefits kick in.
- **Copay.** The amount you're responsible for after your insurance pays your dentist an agreed-upon amount for services. Copays are often due at the time of your appointment.
- **Annual maximum.** The total your dental plan will pay, per year, for services.
- **Lifetime maximum.** The total your dental plan will pay over the life of your coverage.

Defining your potential needs

Check all the scenarios that could apply to you or covered family members, then use this list to help you select the right plan.

- **Do you have dependents who might need braces someday?**
- **Have you ever suffered a serious injury to your teeth, jaw or face?**
- **Do you have multiple risk factors for tooth loss? (See list below.)**
 - Male over the age of 35
 - Prolonged lapses in dental care
 - Periodontal (gum) disease
 - Former or current smoker
 - Diabetes
 - High blood pressure
 - Rheumatoid arthritis
- **Does the plan offer any extra benefits or discounts?**
 - At-home teeth whitening
 - Discounts on ultrasonic toothbrushes
 - Medical-alert system
 - Hearing aid discounts
 - Vision discounts
 - Other discount services



GEHA is one of six nationwide FEDVIP carriers you can choose during Open Season for coverage beginning January 1, 2019.

Don't let the deadline pass you by

You must enroll between November 12 and midnight EST on December 10, 2018

Learn more about your options online:

- Check your eligibility, sign up for updates and compare FEDVIP dental and vision plans at **TRICARE.benefeds.com**.
- Find answers to frequently asked questions about FEDVIP at **opm.gov** and TRICARE at **TRICARE.benefeds.com**.
- Compare GEHA's Standard Option and High Option plans at **gehadental.com/TRICARE**.

Ready to enroll during Federal Benefits Open Season? Follow these steps:

- ① Visit benefeds.com and click on the tab that reads "Enroll in a Plan."
- ② Enter your BENEFEDS login information, or set up a new account.
- ③ Verify your eligibility.
- ④ Select your FEDVIP dental plan of choice, and add eligible family members.
- ⑤ Review and confirm your enrollment.



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