The Business Council of New York State, Inc. Insurance Fund
Dental and Vision Program FAQ’s

The Insurance Fund and Ameritas have been working around the clock to answer commonly asked questions for our customers and business partners. We will update the following list of questions and answers regularly. If your question is not addressed, please contact your Business Council representative.

Your well-being is our top priority and we encourage you to take care of your dental health needs. If you have concerns about your coverage at the time of service, or there were changes to your treatment plan because of the pandemic, we would like to assist you with those concerns. Please submit your dental claims as usual and include a brief explanation with those extenuating circumstances. We will review each situation individually.

*If you have a dental emergency, please visit your provider and submit your claim accordingly.*

**If an employer has to terminate all employees for 60 days and then rehire them, would the group coverage remain active?**
The group would remain active with zero members for two months, and then resume coverage after 60 days. Rates and plan benefits would not change.

**Will coverage terminate if the payment is late?**
No. The Insurance Fund will not mail any late payment notices during this time, and we’ll work with customers to extend grace periods. We ask that if there is an issue relating to payment of premium, for groups to contact our finance department and let us work with you on a solution.

The Insurance Funds will adhere to any state mandated premium grace periods as a temporary exception to our policy during this time.

**Will coverage continue if an employee was furloughed or temporarily laid off?**
For dental coverage an employer/employee has the option to do what’s best for them:

- **Option 1:** If they terminate the coverage during this crisis and send us the termination date, and we would no longer charge premium and claims payments would stop during this timeframe. When employment resumes, they can reinstate the coverage and as long as this is done within 12 months, their benefits (deductible, maximums) will resume as if they’ve never left.
- **Option 2:** If they want to continue coverage, they can pay premium. In this scenario, claims payments continue as normal and when they come back to work, they would resume payroll deduction or employer contributions.
- **Option 3:** Employers can offer COBRA or State Continuation Benefits to the employees.

For vision coverage, some plans use a calendar year and others are based on the date of service. If a member terminates vision coverage (VSP, EyeMed or VisionPerfect) during a furlough period and then reinstates that coverage within the plan year or within 12 months, coverage would resume with the same plan frequencies. If coverage is reinstated after 12 months or after the plan year is complete, the plan would start over with new frequencies based on the new effective date.

**How long will this furlough policy continue?**
This would last for the length of the crisis situation. We understand that some employers could be in crisis mode long after the coronavirus is contained. We will work with groups individually to do what’s best for them.
**Does the furlough policy pertain to all products?**
This policy pertains to dental and vision coverage.

**If an employee’s hours are reduced to a level below the Member Definition, can coverage be continued?**
Yes. We understand that this will occur as employers are trying to maintain their own service levels. We trust our policyholders and know that they’re trying to do what’s best for their employees during this time.

**How long will coverage continue for employees whose hours are reduced?**
We understand that this crisis could last long after the coronavirus is contained. We know that our policyholders are trying to do what’s best for their employees and trust their judgement. If they consider the member eligible for benefits, we will too.

**What if employees take COBRA coverage upon termination?**
If employees are terminated and want to continue with COBRA, this continuation is available for as long as COBRA is allowed for a termination – typically 18 months.

If enrollment is delayed, what can we do to ensure that those who would have enrolled do not have any waiting periods or eligibility hardships once they come back to work?
We would work with the employer and make employees eligible when the employer makes them eligible, and not impose late entrant penalties.

**Will Ameritas extend timely claim filing by 60 days given the current situation?**
If your claim was not covered due to timely filing requirements, please contact a customer service representative for review.

**Does Ameritas cover teledentistry claims?**
We will adjudicate claims the same as we do today for services received in person in a traditional practice setting. Providers have been advised through ADA guidance on how to submit claims accordingly. Consideration of waiving frequency limits for applicable services will be determined on a case-by-case basis.

**What if a member has an emergency can’t get in to see the dentist they normally see?**
We encourage our members to take care of their dental health needs. Please submit the claim as usual with a statement regarding your situation. We will be glad to review the claim on a case-by-case basis. It is important our customers are not affected by this time of uncertainty.

**What if a child is maxing out in age at end of the month and dental office canceled their appointment?**
We encourage our members to take care of their dental health needs. Please submit the claim as usual with a statement regarding your situation. We will be glad to review the claim on a case-by-case basis. It is important our customers are not affected by this time of uncertainty.
What if an employee has a tooth extracted during the time they are furloughed or laid off, and therefore not covered, and then they return to work and resume coverage?

We will treat the replacement of that tooth the same way we would have had they been covered at the time the tooth was extracted. If the member or provider submits the claim with an explanation that the extraction was done during the furlough, we will make the exception to process the claim provided that this a covered procedure and the waiting periods have been met.

What if a member has paid a claim and wants to be reimbursed, but the claim requires x-rays and charting and the dental office is not open to provide this information?

Please have the employee contact our customer service representatives to waive the request for additional information when your dental office is closed.

What if a member or dependent is actively receiving orthodontic treatment and the employee was furloughed or temporarily laid off?

Please have the employee submit a statement with their next orthodontic payment and we will restart the program and resume payment on the treatment program.

Please contact the Business Council of New York State, Inc. Insurance Fund at 1-800-692-5483 or customerservice@bcnys.org if you have any additional questions or concerns.