



### **Dig into out-of-network dental reimbursements**

August 15, 2019

---

Employers get the chance during PPO plan selection to choose which reimbursement method to use when their members see dentists who aren't in their plans.

The methods are based on the distribution of dental fees in a particular area (percentile of fees) or the maximum allowable charge (equal to in-network reimbursement) for each covered service.

**Percentile of fees** helps reduce balance-billing, or the difference in what the plan pays and what the dentist charges. **Maximum Allowable Charge (MAC)** typically increases balance-billing but results in lower up-front premiums.

**With Anthem Dental Essential Choice PPO**, employers can choose between MAC and percentile of fees. We recommend MAC plans for groups when the majority of members use dentists already in their plans.

Learn more about these reimbursement options, and how the market compares to our plans, in this flier for [Small Groups](#) and [Large Groups](#).

Questions? Contact your sales rep.

*This article applies to:*

- Virginia
- Small Group and Large Group