

ORTHODONTICS

Nonparticipation Providers should list the following on the claim form for a predetermination of coverage:

1. Total fee charged;
2. Fee for bands;
3. Months of treatment; and
4. Charge per month

The predetermination will state how much the insurance will allow for the bands and the monthly maintenance allowed. The coverage will be 80% of these figures.

The orthodontist can submit monthly (most submit quarterly) to receive the monthly payment.

The total reimbursement is \$500 per calendar year with no lifetime maximum.

The phone number to call for questions is 1-877-470-3715.

SELECTPRO PROVIDER NETWORK
ORTHODONTIC ALLOWANCES

Insertion...	\$759.00
Monthly	\$64.00

Treatment Maximum Four Years

1 Year	\$1,527.00
2 Year	\$2,295.00
3 Year	\$3,063.00
4 Year	\$3,831.00

The treatment maximums represent the most a patient can be billed for an orthodontic treatment plan. Treatment plans over four years must be reviewed by Select PRO.

The PPO allowance for retention will be \$30.00 per visit up to a maximum of 12 visits.

Pre-orthodontic care is considered part of the actual orthodontic treatment plan and cannot be billed as a separate expense.

Participation Dentist agree to accept the maximum allowances in this fee schedule as payment in full. The participating dentist agrees that the only charges for which a covered patient shall be liable are, for services not covered by the Dental Plan due to co-payments, deductibles, plan maximums and specific dental plan provisions.