



## *Health Care Reform News*

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### **Dental Insurance: Changes to Dependent Eligibility**

**June 11, 2010**

The Patient Protection and Affordable Care Act requires all new and renewing individual and group health plans to cover dependents up to age 26 upon their plan renewal date on or after September 23, 2010. Our last Health Care Reform Newsletter, on May 28th, reviewed how each of the health insurance carriers were handling this new legislation.



The new legislation does not state any requirements for dental insurance; however, HealthPartners and Delta Dental have recently announced how they will handle the new dependent eligibility requirements in regards to dental benefits. Below is a summary from each of the carriers. If you have specific questions regarding your dental plan or how the change in dependent coverage will affect your company, please contact your Unison Employee Benefits Consultant. Additional information on how dental insurance will be impacted by health care reform is not yet available. Unison will continue to keep you up to date as additional details are released.

#### **HealthPartners**

Beginning June 1, 2010, any dependent currently enrolled on their parents' fully insured HealthPartners dental plan is eligible for coverage up to age 26.

The early coverage date of June 1, 2010 WILL NOT APPLY TO DEPENDENTS NOT CURRENTLY ENROLLED. Parents will be able to enroll dependents on their dental plan during a special enrollment period beginning with their first renewal on or after June 1, 2010.

Self-insured groups are not required to make this change but have the option to implement this change on June 1, 2010 or at renewal.

#### **Delta Dental**

Beginning June 1, 2010, any dependent currently enrolled in their parents' fully insured, pool-rated Delta Dental plan is eligible for coverage up to age 26.

Dependents who lost their coverage prior to June 1, 2010 due to the plan's age limit and wish to renew should complete a re-enrollment by August 1, 2010. Dependents may also enroll during open enrollment, if applicable to your group.

Individually rated fully-insured groups and self-insured groups are not required to make this change but have the option to implement this change on June 1, 2010 or at renewal.