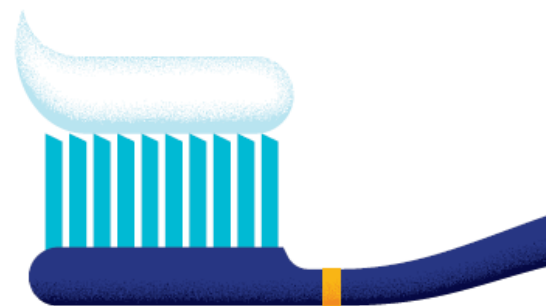




Answers to your dental plan questions



Palm Beach County BOCC is offering five different dental plan options through UnitedHealthcare (UHC), matching the current dental plans offered through Solstice.

Q1. Which company will be offering dental coverage for 1/1/2027? UnitedHealthcare (UHC) will be the new carrier.

Q2. What type of plans are being offered through UHC? The same two DHMO & three PPO plan options you have today.

DHMO: Enhanced DHMO Option (S200B Access+) & the Basic DHMO Option (S700B Access+)

PPO: Low PPO, High PPO, and Premier PPO

Q3. How can I find out if my dentist is an in-network contracted provider under UHC PPO plans? The UHC PPO network is the same as the current Solstice PPO Network; there should be no provider disruption. You can check for your dentist at the PBCBOCC Premember website <https://exploreuhcplans.com/pbcbocc> (available October 13th). Navigate to the Dental Plans section and select the Dental PPO provider lookup. You can also contact the UHC Onsite Service Account Managers:

- Evelyn Giraldo 561-233-5474, Evelyn_Giraldo@UHC.com
- Leslie Smalley 561-233-5463, Leslie_Smalley@uhc.com

Need help?

Visit myuhc.com. Sign in for 24/7 access to details about your dental plan:

- Get tips on taking care of your teeth and gums
- Watch dental health videos
- Estimate treatment costs
- Search for dentists
- Access your digital dental ID card
- View your claims

Q4. How can I find out if my dentist is an in-network contracted provider under UHC DHMO plans? Similar to the PPO Network, the UHC DHMO network is the same as the current Solstice DHMO Network, so there should be no Provider disruption. You can check for your dentist at the PBCBOCC Premember website <https://exploreuhcplans.com/pbcbocc> (available October 13th). Navigate to the Dental Plans section and select the Dental DHMO provider lookup. You can also contact the UHC Onsite Service Account Managers:

- Evelyn Giraldo 561-233-5474, Evelyn_Giraldo@UHC.com
- Leslie Smalley 561-233-5463, Leslie_Smalley@uhc.com

Q5. If my dentist is not a participating in-network provider, can I nominate the dentist to join the network? Yes, you can nominate a dentist to join the PPO or DHMO networks. Please email the dentist name and phone number, along with if you are nominating your dentist for the Dental DHMO or Dental PPO to James_J_Moore@UHC.com.

Q6. Will the DHMO plans work the same as the current Solstice DHMO plans? Yes. The two current DHMO plans will have the same benefits, but will be administered through UHC. If you are on the Medical coverage through with County with UHC, this will mean that you will have the same member ID for both coverages and you will be able to access all your benefits through the myUHC.com website or the UHC app. Please refer to the DHMO Plan Comparison for more information on the differences between the two plans.

Q7. What are the dental premium rates for Plan Year 2027? Please find the rates for the different plan options by level of coverage.

DHMO Plans	UHC Basic DHMO		UHC Enhanced DHMO	
	Monthly	Bi-weekly	Monthly	Bi-weekly
Level of Coverage				
EE Only	\$ 12.18	\$ 6.09	\$ 15.62	\$ 7.81
EE + 1	\$ 20.82	\$ 10.41	\$ 27.34	\$ 13.67
EE + 2	\$ 28.20	\$ 14.10	\$ 33.86	\$ 16.93
EE + 3 or more	\$ 37.22	\$ 18.61	\$ 43.00	\$ 21.50

Q8. Do I need to select a primary care dentist or declare a primary dentist under the DHMO plans? No, both of the UHC DHMO plans are open access. You and your covered dependents DO NOT have to declare a primary dentist under the DHMO plans. The DHMO is an open-access plan, meaning a member does not have to select a primary care dentist.

PPO Plans	UHC Low PPO		UHC High PPO		UHC Premier PPO	
	Monthly	Bi-weekly	Monthly	Bi-weekly	Monthly	Bi-weekly
Level of Coverage						
EE Only	\$ 19.50	\$ 9.75	\$ 38.16	\$ 19.08	\$ 47.26	\$ 23.63
EE + 1	\$ 37.02	\$ 18.51	\$ 73.14	\$ 36.57	\$ 90.60	\$ 45.30
EE + 2	\$ 45.30	\$ 22.65	\$ 84.48	\$ 42.24	\$ 104.66	\$ 52.33
EE + 3 or more	\$ 62.88	\$ 31.44	\$ 119.50	\$ 59.75	\$ 148.02	\$ 74.01

While in-network dental visits are encouraged, you have the convenient flexibility of visiting an out-of-network provider and receiving reimbursement as defined on the DHMO Schedule of Benefits for 35 preventive and diagnostic and some restorative procedures. However, with the exception of the 35 covered out of network ADA codes, services must be obtained from a participating in-network general dentist or specialist.

You will pay the dentist the co-payments listed on the Schedule of Benefits. There are no deductibles, no waiting periods, no claims forms to submit, no annual benefit dollar maximums. There are defined copayments on over 500 procedure codes. Implant coverage continues to be available at copayment level listed on the Schedule of Benefits through a network of implant specialists. Cosmetic procedures (teeth whitening, bonding, and veneers) are included.

There is a 25% discount on all procedure codes that are not listed on the Schedule of Benefits. Please review the detailed Schedule of Benefits Member Fee Schedule for more information.

Q9. If I utilize an out of network provider for the DHMO 35 ADA Codes, how do I get reimbursed? The provider may complete an ADA claim form on your behalf to receive reimbursement for part of the cost. If not, you may submit an ADA claim form directly to UHC for partial reimbursement. If you need an ADA claim form to submit, please request one from your dentist or call/email one of the UHC Onsite Service Account Managers to have one provided. You can either mail the completed claim form to the address on the back of your Dental ID card or email to Evelyn or Leslie:

- Evelyn Giraldo 561-233-5474, Evelyn_Giraldo@UHC.com
- Leslie Smalley 561-233-5463, Leslie_Smalley@uhc.com

Q10. How can I obtain specialty dental care under the DHMO plans? Should the services of a specialist (Oral Surgeon, Endodontist, Periodontist, Pedodontist or Orthodontist) be necessary, you may go directly to a participating specialist by self-referring to any participating specialist. You will pay the copayments listed in the Schedule of Benefits for the plan that you are enrolled in for the procedures that are rendered. Please confirm the specialist is contracted with the UHC DHMO.

Q11. If I choose, how do I obtain a prior written authorization for specialty care under the DHMO plans, how do I do this? To obtain a written authorization for specialty care, contact UHC Member Services at the number on the back of your ID card.

Q12. How long does the Pre-authorization process for specialty care typically take under the DHMO plans? A typical pre-authorization is usually processed within 72 hours. Written notification of the pre-authorization is issued to both the dental specialist provider and the member. Pre-authorization is provided usually immediately for an evaluation if the member is experiencing acute pain. Please note that treatment is subject to clinical review and benefit frequencies.

Q13. Do I need a referral for my child to visit a pediatric dentist under the DHMO plans? No, members do not require a pre-authorization on the DHMO to access the Pediatric Dentist. Members may simply find the participating specialist in our directory and call the providers office directly to schedule their appointment.

Q14. Are Pre-Treatment Plans recommended for the DHMOs? Your dental plan covers an extensive array of dental procedures at either a fixed copayment or at a discount off the dentist's normal charges for non-covered procedures. It is highly recommended that prior to having dental work started, you request a pre-treatment plan or estimate from your dentist on all treatment over \$300. Should you have any questions regarding your treatment plan, you can always refer to your Schedule of Benefits or call UHC to ensure that you receive the maximum benefit from your dental plan.

Q15. Is the DHMO plan available nationally? Yes. Our DHMO network is continually growing with providers all over Florida and currently in 40 states. Please visit the PBCBOCC Premember website available October 13th at <https://exploreuhcplans.com/pbcbocc> or, once enrolled and active, log into your myUHC.com portal or use the UHC app. Please see the DHMO network availability map on page 6 of this FAQ.

Q16. Is there an emergency benefit available out-of-network for the DHMO plan? Yes. In addition to the covered 35 out-of-network ADA procedure codes, DHMO members experiencing an emergency out of the service area over 100 miles, members can receive covered emergency services from any general dentist. Typical emergency services are an emergency examination, x-rays, extraction, prescription, or other palliative care to relieve immediate pain, infection, or bleeding. Members should return to their area network dentist for any restorative and/or definitive treatment, such as but not limited to fillings and root canals to correct the clinical situation which created the symptoms that required emergency care. Members may be reimbursed up to \$100.00 for emergency care towards the abatement of pain. Members file a claim to receive the reimbursement.

Q17. Are the PPO plans available nationally? Yes. Besides the UHC PPO network being available throughout Florida, we have one of the largest networks covering the majority of the United States. Please visit the PBCBOCC Premember website available October 13th at <https://exploreuhcplans.com/pbcbocc> or, once enrolled and active, log into your myUHC.com portal or use the UHC app.

Q18. What are some of the features of the Low PPO plan? The UHC Low PPO plan allows you and each of your covered family members to use a provider of your choice; however, you'll receive a higher level of coverage when you choose a participating in-network PPO provider. If you use an out-of-network provider fees are subject to the contracted provider Maximum Allowable Charges. Please note there is no adult Orthodontic coverage on the Low PPO plan. Please review the Plan Summary Benefit Schedule for more information.

Q19. What are some of the features of the High PPO High plan? The UHC High PPO Plan allows you and each of your covered family members to use a provider of your choice; however, you'll receive a higher level of coverage when you choose a participating in-network provider. This plan offers an enhanced in-network annual maximum benefit of \$1,500. This plan covers Implant Services under Class III (Major Services) with a separate annual implant maximum of \$2,500 per calendar year. Please review the Plan Summary Benefit Schedule for more information. If you use an out-of-network provider, allowed fees are based on 80% of Usual and Customary Charges.

Q20. What are some of the features of the Premier PPO plan? The UHC Premier PPO plan allows you and each of your covered family members to use a provider of your choice; however, you'll receive a higher level of coverage when you choose a participating in-network provider. This plan offers an enhanced in-network annual maximum benefit of \$3,500. This plan covers Implant Services under Class III (Major Services) with a separate implant maximum of \$2,500 per calendar year. Out-of-network benefits are covered at the 90th percentile of UCR. Please review the Plan Summary Benefit Schedule for more information.

Q21. Does UHC offer a rollover for the PPO plans? Similar to the Solstice Low and High PPO plan options, UHC offers a Consumer MaxMultiplier program for the UHC Low and High PPO plan options. This program is an increasing calendar year maximum feature that encourages members to carry forward part of their unused calendar year maximum if certain conditions are met. If a member moves from the Low PPO Low to the High PPO, the amount carried over will increase. UHC will be rolling over any additional Solstice benefits that have been accumulated so you won't lose the increased calendar year maximum that you have build up. Rollover amounts earned prior to Plan Year 2026 will be available January 1st, 2027. Rollover amounts earned in Plan Year 2026 will be credited by March 31st, 2027. Note: The Premier PPO Premier Plan does not offer the UHC Consumer MaxMultiplier program.

Q22. Are Pre-Treatment Plans recommended for the PPO dental plans? Pre-treatment estimate is recommended for any service estimated to cost more than \$300.

Q23. I am in the middle of Orthodontic treatment (Orthodontia in progress). What should I do? When a member transitions coverage to UHC, UHC will pay for orthodontic cases in progress on a prorated basis as of the effective date with UHC. The number of months remaining in treatment and the benefit level are taken into consideration when determining payment. The UHC Transition of Care Application must be completed and submitted to UHC, along with the supporting documents, prior to having additional treatment. Please reach out to our UHC Onsite Service Account Managers, Evelyn or Leslie, to assist in this process.

Q24. How do I enroll and what do I have to do during this Open Enrollment period? If you currently participate in the Solstice dental program and you do not take any action during Open Enrollment, coverage for you and your covered dental dependents will default automatically to your current dental plans, as follows:

- **DHMO Dental Plans**
 - Solstice Basic DHMO (\$700B Access+) to the UHC Basic DHMO (\$700B Access+)
 - Solstice Enhanced DHMO (\$200B Access+) to the UHC Enhanced DHMO (\$200B Access+)
- **PPO Dental Plans**
 - Solstice Low PPO to the UHC Low PPO
 - Solstice High PPO to the UHC High PPO
 - Solstice Premier PPO to the UHC Premier PPO

You have to make an active selection in MyBenefits between Oct 20, 2026 and Nov 2, 2026 if:

- You do not currently participate in the dental program and wish to join the dental plan for PY 2027, or
- You do not want your dental plan to default automatically to the coverage indicated in the points above,
- You want to discontinue your current dental plan

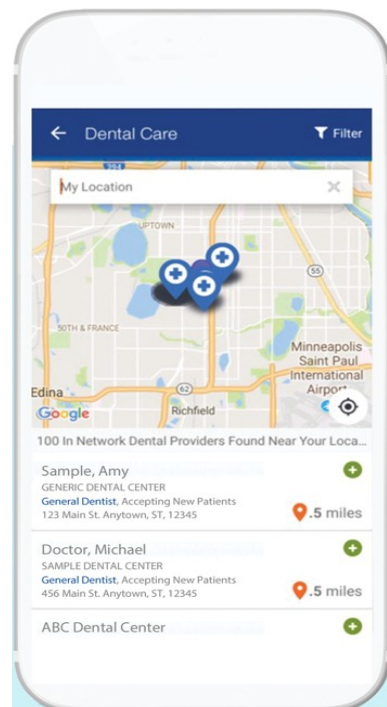
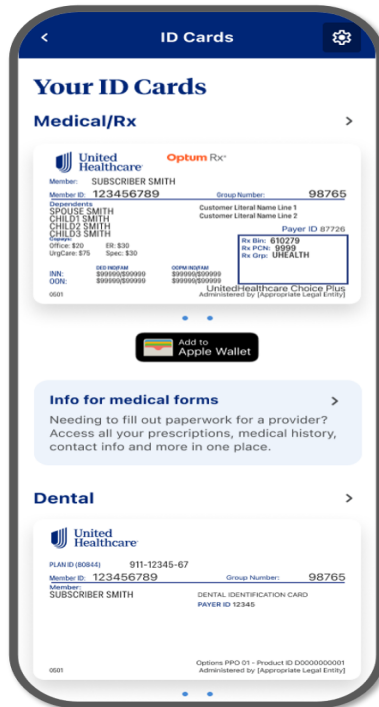
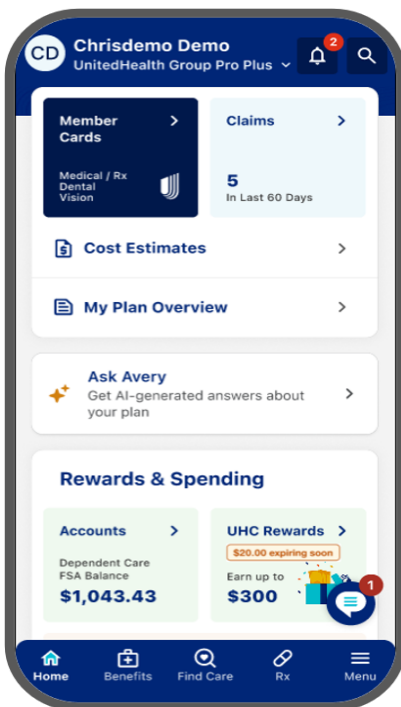
If you need assistance with making your 2027 Group Insurance elections, contact Risk Management at 561-233-5400 or email your Group Insurance office at BCCMyBenefits@pbcgov.org.

Q25. When will I receive new dental cards? New UHC ID cards will be issued in by the end of December 2026, arriving at your home prior to January 1st, 2027. Your digital ID cards will be accessible via the myUHC.com portal or the UHC app. If you are on the County medical plan through UHC, your dental Member ID will be the same as your current Medical member ID.

Q26. How can I find out more information about dental coverage? Visit the PBCBOCC Premember website at <https://exploreuhcplans.com/pbcbocc> or, once enrolled and active, log into your myUHC.com portal or use the UHC app. Additionally, you can visit the Publications, dental section of MyBenefits webpage for posted information.

Just as in prior years, you may watch a recorded Open Enrollment meeting which will be posted on the MyBenefits as soon as it becomes available. Additionally, you can review the 2027 Employee Benefits Information booklet for dental plan information which will be posted on MyBenefits in advance of Open Enrollment meetings.

Q27. Does UHC have a mobile app? Yes. It is the same app that members use for their County medical coverage through UHC, the UHC app.



**Download
the app**



- Q28. Is there a website that I can visit, once my coverage is effective?** Yes. You can access your benefits at myUHC.com.
- Q29. Does the dental plan offer vision coverage?** Yes. The UHC Clear 100 Vision Plan is an added value vision discount plan that is available to members of the dental DHMO and PPO plans, at no additional cost. Review the Clear 100 Vision Plan handout for more information. There are no out of network benefits with the Solstice Clear 100 Vision plan. For a list of providers please visit the PBCBOCC Premember website beginning October 13th at <https://exploreuhcplans.com/pbcbocc> or, once enrolled and active, log into your myUHC.com portal or use the UHC app.
- Q30. What other programs do I have access to as a UHC member?**
- **Prenatal Dental Care Program:** UHC extends prenatal dental benefits in the second or third trimester of pregnancy.
 - **UHC Member Marketplace:** Savings on hundreds of different services, items and experiences like tickets and travel, wellness items and even items for your pets. Visit <http://uhcspecialty.benefithub.com/> for more information.

Thank you for being part of the UHC Family!

