



## **Enrollment Instructions 2021** *Tufts University Voluntary Dental Plan*

Tufts University is pleased to offer the Voluntary Delta Dental PPO Plus Premier Plan to all Tufts University Students. For this plan, Delta Dental is the insurance provider and EBPA is the billing and enrollment administrator.

Enclosed you will find:

- Delta Dental Enrollment Form
- Delta Dental Summary of Benefits
- Payment Form, ACH Withdrawal Authorization, ACH Q&A

If you choose to enroll in the dental program, you are electing to enroll for the entire calendar year, the enclosed materials provided will help you get started. Begin by reviewing the Delta Dental Summary of Benefits to decide if this plan is right for you. **Enrollment Form and payment must be submitted by December 1, 2020.**

If you elect this plan, you are choosing to enroll for the entire calendar year of **January 1, 2021 – December 31, 20201**. You have the option to make one payment via check or ACH for the annual premium. The cost of the dental plan is:

	Annual Premium
<b>Individual</b>	\$509.88
<b>Family</b>	\$ 1,237.56

*This premium includes a \$4.60 per month administration fee.*

**IMPORTANT:** Students currently participating in the plan must re-enroll for the 2021 plan year. This includes providing your banking information for ACH withdrawal authorization. Coverage **WILL NOT** be renewed unless a new enrollment form and banking information is received.

### **Enrollment Instructions:**

- Carefully review the Summary of Benefits so that you understand the plan and the benefits. If you have questions on what is or what is not covered please contact Delta Dental 1-800-872-0500.
- Complete the Delta Dental Enrollment Form.
  - You may leave the “Benefit Administrator Authorization” section blank.
  - You may also leave questions #20 and #21 blank on the Enrollment Form.
  - Please sign and date the form at the bottom (#22).
- Complete the Payment Form and ACH Authorization Form and indicate if you would like to have automatic withdrawal from your checking or savings account. **ACH automatic premium payments are scheduled to be withdrawn effective January 1, 2021.**

### **Enrollment Form and Payment submittal options:**

- **Mail:** Send the Delta Dental Enrollment Form, ACH Authorization, and check (if required) to: EBPA, 37 Industrial Drive Suite E, Exeter, NH 03833. **Make checks payable to EBPA.**

- **Secure Portal Upload:** Electronically transmitted through the EBPA Secure Document Submission Portal: Go to: <https://select.ebpabenefits.com>. Enter Tufts University under Employer Name or Group Number. Select Click here to submit claims, forms, or substantiation electronically. Then select COBRA and Retiree/Direct Billing to upload your document(s).

As a Delta Dental PPO Plus Premier Plan member, you will have access to two of Delta Dental's extensive national networks:

- Delta Dental PPO, with 166,000 participating dentist locations and Delta Dental Premier, the largest dental network in the country with over 248,000 dentist locations.
- Both networks provide you with discounts to dental procedures and a no balance-billing policy.
- What's the difference between the Delta Dental PPO and Delta Dental Premier networks?
  - You will enjoy the greatest out-of-pocket savings when visiting Delta Dental PPO network dentists.
  - You will receive good value from Delta Dental Premier network dentists who generally accept discounted fees, but will be subject to the out-of-network coinsurance level shown above.
  - **NOTE:** Both networks offer discounted fees and a no balance-billing policy. If you choose to receive services from a non-participating dentist; you will have higher out-of-pocket costs as the Delta Dental contract rates and no balance-billing policy **do not apply**.

**To locate a Delta Dental PPO or Premier provider, either:**

- Go online to: <http://wsprod.deltadental.com/DentistSearch/MassachusettsDentistSearchController.ccl>
- Call the Delta Dental Customer Service Department at 1-800-872-0500.

**What to expect after Enrolling in the Plan**

A Delta Dental ID Card will be mailed to the home address you provided when enrolling. If you have not received your card by January 10, 2021, call Delta Dental Customer Service at 1-800-872-0500.

**Who do I call if I have questions?**

For questions regarding plan coverage, plan restrictions, claims issues or to find participating dentist locations, contact Delta Dental's Customer Service Department at 1-800-872-0500 or online at [www.deltadentalma.com](http://www.deltadentalma.com).

For questions regarding enrolling in the plan, payment status, payment amount, or to set up the ACH withdrawal payment option, contact EBPA at 1-888-232-3203 or email [premiumcollection@ebpabenefits.com](mailto:premiumcollection@ebpabenefits.com).