

## **INTRODUCTION**

Good (Morning, Afternoon, Evening). My name is (Agent Name) with (Agency Name). May I speak to (Customer Name?)

Our company is currently representing The Health Depot Association ("HD"), which is an association of self-employed workers and independent contractors. I am the Health & Wellness Advisor assigned to your file.

I am calling today to talk about our **HD Dental Plus** membership plan, which includes Fully Insured Dental benefits underwritten by United Concordia Insurance Company, plus a MES Vision plan.

Oral and eye health are important to overall health and well-being. The HD Dental Plus plan is available to Health Depot members and provides you with insured benefits to help cover the costs of regular dental and vision care.

**Here is a summary of plan features and benefits. Again, please remember, you can go to the Health Depot Association website and see all of the membership options available to you in the various HD memberships:**

- I. The United Concordia Dental plan has a \$1,500 annual benefit maximum\* per person with NO waiting periods for service. \*The annual benefit maximum does not apply to Class 1 – Diagnostic/Preventive Services.
- II. The plan has a \$50 deductible per person with a Family maximum of \$150. The deductible does not apply to Class 1 – Diagnostic/Preventive Services.
- III. The Coverage is divided into 3 Classes.
  - a. Class 1 is for Diagnostic/Preventive Services – Examples of Class 1 services are: Cleanings, X-Rays, Fluoride and Sealants.
    - i. The plan pays 100% for Preventive & Diagnostic Care
  - b. Class 2 is for Basic Services – Examples of Class 2 services are: Fillings, Simple Extractions, Crowns, Bridges and Denture Repairs, Endodontics and Periodontics.
    - i. The plan pays 50% for Basic Services
  - c. Class 3 is for Major Services – Examples of Class 3 services are: Onlays, Inlays, Crowns, and Complete Dentures.
    - i. The plan pays 50% for Major Services

Reimbursement is based on United Concordia's schedule of maximum allowable charges (MACs). You can receive care from any licensed dentist, however, Network dentists agree to accept the scheduled allowances as payment in full for covered services. Non-network dentists may bill you for any difference between the scheduled allowance and their fee (also known as balance billing). United Concordia Dental's standard exclusions and limitations apply. Orthodontics are not covered on this plan.

- IV. **PPO Dental Network** – The HD United Concordia Dental plan includes access to the Advantage 2.0 dental PPO network. A network dentist saves you the difference between the negotiated fees and the dentist's regular charges. And, you stretch your benefit dollars by getting more services before reaching your annual maximum. Network dentists also file your claims for you, saving you time and the hassle of paperwork.

## **V. ADDITIONAL BENEFITS**

The United Concordia dental plan includes the following additional benefits:

- **Preventive Incentive** – With Preventive Incentive, all charges for covered diagnostic and preventive (Class I) services— such as cleanings, exams, x-rays and more—do not count toward your annual maximum. This promotes good oral health by encouraging you to receive preventive care, and leaves you with more benefit dollars to use for other covered dental procedures.
- **Smile for Health - Wellness** – If you have a chronic illness and periodontitis (gum disease), Smile for Health-Wellness gives you additional coverage to take control of gum disease and receive information through outreach.
- **Mobile Apps** – United Concordia has a mobile app for members to get benefits and oral health information on the go, as well as a kids app that makes brushing fun for kids and encourages good oral habits.

## VI. ASSOCIATION BENEFITS

Your HD Dental Plus membership also includes the following association benefits:

- **MES Vision Program** – Members receive one comprehensive vision examination every 12 months, after a \$20 deductible (in-network) and discounts on eyewear such as lenses, frames, contact lenses and more.
- **ScriptSave Prescription Savings Card** – Members and their dependents can save on prescription medications at over 62,000 participating pharmacies across the nation.
- **IDLife Nutritional Products** – IDLife is your own Individually Designed Nutrition Program to help you achieve the health and wellness you've always wanted. Members receive a discount on IDLife's scientifically formulated nutritional products.

## VII. ENROLLMENT

Mr. /Mrs. \_\_\_\_\_ The HD Dental Plus membership we are recommending to you is economical and supports your everyday healthcare and wellness needs. Monthly membership rates are:

HD Dental Plus Monthly Membership Rates	
Member	\$59
Member + 1	\$101
Member + Family	\$147

**Will the plan be for you and your family or just yourself?** [Get personal information for each person. If the dependent is the member's child, make sure the child is younger than 26 years of age.]

### **What address would you like your ID Cards sent to?**

Our process to get your membership and benefits started as soon as possible is to take your application today. This includes your first month's payment of \_\_\_\_\_ [and a one-time \$35 non-refundable processing fee. **Do not read this portion if you are adding the dental to an existing Health Depot membership. In that case, the processing fee is waived.**] The whole process is done quickly right over the phone.

Finally, we have membership effective dates of the 1st of the month through the 28th of the month. This allows you to take advantage of your membership benefits and services as quickly as possible.

What form of payment would you like to use? We accept Credit/Debit cards and ACH Bank Draft.

For **[Credit/Debit cards]**, please provide the card type: Visa/MC/Amex/Discover, CC# \_\_\_\_\_, Exp date \_\_\_\_\_ and CVV code \_\_\_\_\_. Is the billing information the same as the member info? If no, we will need to speak to the account holder to obtain his/her consent as well as first, last name, and address.

For **[ACH Bank Draft]**, please provide the bank routing number \_\_\_\_\_, account# \_\_\_\_\_, account type: checking/savings, and bank name \_\_\_\_\_. Is the billing information the same as the member info? If no, we will need to speak to the account holder to obtain his/her consent as well as first and last name.

Your Monthly recurring membership dues billing occurs on the same day each month of the original effective date of your membership. We will process your application today and you will receive a welcome email with instructions for how to login to our member portal. On the portal, you will find your membership guide, including a detailed description of your benefits, and member service at 800# attended by Licensed Agents who are available to answer any questions about your benefits. If you do not have access to the internet, you can call Member Service at (855) 351-7535 to obtain a copy of your membership guide which includes a detailed description of your benefits.

Please note that you have 30 days from your effective date to review your membership. If you are not fully satisfied, you may return it for a full refund of all membership dues as long as you have not incurred any claims under the insurance plan. **(Please have them confirm this by saying "yes".)**