



Review Article

Dental Insurance Plans: A Complete Overview

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How to cite: Naziya K. Babu, Vidhya G., Dental Insurance Plans: A Complete Overview. Int J Orofac.Bio.2024;8(2);10-15.

DOI: <https://doi.org/10.56501/intjorofacbiol.v8i2.1156>

Received: 15/08/2024

Accepted:23/08/2024

Web Published:20/09/2024

ABSTRACT

In India, a significant middle-class demographic and health-related expenses often push families into debt and exacerbate poverty. Most developed countries have dental insurance plans available to many people, but Dental insurance is currently nearly nonexistent within the Indian market. Insurance providers extend dental care benefits exclusively in instances necessitating hospitalization, such as in accidents requiring dental surgical intervention. The availability of dental insurance shields consumers from the unexpected financial expenses that come with dental treatments. Dental insurance plans will improve people's attitudes toward availing of dental care, thereby resulting in improved oral health in the communities. This review provides an overview of various dental insurance plans available in the Indian market.

Keywords: dental Insurance, insurer, insurance plan, health insurance.

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INTRODUCTION

In general, scarcity, well-being, and revenue opportunities are recognized as intricately connected, particularly in developing nations, which consequently impose numerous obstacles on the healthcare sector. In India, a significant middle-class demographic and health-related expenses often push families into debt and exacerbate poverty. However, various government-instituted health insurance plans have been integrated into the healthcare framework, one of which is RSBY, a social welfare program designed with built-in incentives for multiple stakeholders to encourage them to provide hospitalization coverage for the underprivileged.[1]

The field of dentistry confronts significant challenges concerning the accessibility of its services across India; however, the principal obstacle remains the lack of a primary healthcare framework. Also, over the years, oral disease burdens have remained the same due to several economic and socio-cultural reasons. A national health survey conducted by the National Health Centre for Statistics reveals that dental insurance determines a person's visit to the dentist to avail of treatment for oral diseases.[2]

Ironically, dental insurance is currently nearly nonexistent in the Indian market. Insurance providers extend dental care benefits exclusively in instances necessitating hospitalization, such as in accidents requiring dental surgical intervention.[3] Besides these provisions, certain employers, including the Indian Army and public sector banks, reimburse for dental treatment expenses. Dental insurance plans will improve people's attitudes toward availing of dental care, thereby resulting in improved oral health in the communities. Thus, this review aims to provide an overview of various dental insurance plans available in the Indian market.[4]

Some of the Central or State Funded Health Insurance Schemes in India are as below

1. Employee State Insurance Scheme—Employee State Insurance Scheme (1952)
2. Central Government Health Scheme (1954)
3. Yeshasvini co-operative farmer's healthcare scheme (2003)
4. Aarogyasri Scheme (2007)
5. Dr YSR Aarogyasri Scheme (Formerly called Rajiv Arogyasri Community Health Insurance Scheme)—2007
6. Rashtriya Swasthya Bima Yojana—RSBY (2008)
7. Niramaya-Disability Health Insurance Scheme (2008)
8. Chief Minister's Comprehensive Health Insurance Scheme (2012)
9. West Bengal Health for All Employees and Pensioners Cashless Medical Treatment Scheme (2014), previously known as 'West Bengal Health Scheme'
10. Swavlamban (2015)
11. Deen Dayal Swasthaya Seva Yojana (2016)
12. Prime Minister's Jan Arogya Yojana—PMJAY (2018)
13. Ayushman Bharat—Mahatma Gandhi Rajasthan Swasthya Bima Yojana (2019)

Under these schemes, beneficiaries can receive cashless treatment in empaneled clinics. Few schemes reimburse them a fixed rate for any procedure that an individual is free to take at any dentist.[5]

Types of Dental Plans Available in India

1. Stand-alone dental insurance plan

This covers expenditures due to treatment of periodontal disease and extracted permanent carious teeth. Within this framework, the reimbursement amount and the duration of coverage are predetermined. Well-known dental care product manufacturers typically offer this plan with a recognized insurance provider.

2. Dental insurance in collaboration with General health insurance

General insurance companies offer this provision as an integral component of their respective insurance plan, including the health advantage policy or student medical policy.

Individuals are entitled to submit claims for dental expenditures in conjunction with various other types of reimbursements, including the costs associated with medication or hospitalization.

3. Fee for service dental insurance coverage

This service provides a specific percentage of savings on the expenses incurred for dental treatment procedures. The insured individual should consult the designated dentist for a discounted service and consultancy fee.

The individual can select a licensed dentist according to one's preferences and convenience without notifying the insurance company. This plan also provides tax benefits as stipulated under the Income Tax Act.

4. Indemnity plans

They offer flexibility in choosing dental care providers, and the company pays a portion of the price of the dental procedure, whereas the patient pays the balance. While they have high premiums, they offer a higher level of coverage.

5. Preferred Provider Organisation (PPO) Plans

PPO plans have a network of dental care providers who provide services at a discounted rate. They have lower premiums compared to indemnity plans.

6. Health Maintenance Organisation(HMO) Plans

HMO plans have empaneled dental professionals, and individuals should choose their dental care provider among them. They have lower premiums than any other plans.

7. Dental Discount Plans

These are not technically insurance plans, but they provide discounts on dental treatments and services at the participating providers. Individuals should pay a monthly or yearly fee to avail of the discounts on the services.[6]

Dental Insurance Plans in India

1. Hindustan Lever Limited (HLL) Introduced 'Pepsodent Dental Insurance' in partnership with New India Assurance, India's first dental insurance scheme. It offered dental insurance valued at Rs.1000/- if they procured toothpaste. Purchasers were required to submit the proposal form, three wrappers of toothpaste, medical certificates, and invoices to avail of this offer.

The coverage included tooth extraction, including the associated costs for medication. However, claims pertaining to cosmetic dentistry or tooth loss resulting from accidents were excluded. This initiative has been officially terminated.

2. The ICICI Lombard Dental Insurance Coverage is incorporated within their general health insurance policy.

This initiative marks a first in India, as it is a health insurance plan that facilitates the reimbursement of dental consultation and treatment expenses under outpatient treatment, with the treatment charges eligible for claims only once during the insurance period. The eligibility age for this policy extends to 65 years, with the option

for renewal up to 70 years of age. The reimbursement associated with the OPD coverage can reach a maximum of Rs. 9,500, depending upon the insured individual's age.

Limitations include a waiting period of 90 days for commencement of cover, and cosmetic treatments, including braces, were not covered under the scheme.[7]

3. Apollo DKV Health Insurance

This plan encompasses coverage for all outpatient dental treatments, with a maximum limit of 5,000 INR but with a waiting period of three years.

4. The HDFC ERGO Maxima Plan is an insurance program to reduce out-of-pocket dental procedure expenses beyond purely aesthetic considerations.

5. OCare, An Insurance Provider as A Service (IPASS) platform, has introduced India's inaugural Dental Insurance Plan.

This group insurance plan covers up to Rs. 25,000 annually, with an annual premium of Rs. 1,699, along with a 100% tax benefit on the premium amount remitted. Dental treatments such as extraction, complete or removable partial dentures, root canal treatment, crowns, bridges, etc., and coverage for pre-existing dental diseases are included. It encompasses dental check-ups twice a year and a loyalty card redeemable for dental services. This plan is exclusively available to corporate entities, educational institutions, and similar organizations, with plans to expand dental insurance coverage to individual clients.

6. Bajaj Allianz Tax gain plan Covers all dental surgery and dental OPD procedures, including dentures. It does not cover inpatient treatments like hospitalization for dental trauma.

7. Apollo Munich Maxima Plan Covers all specialist dental treatments, excluding hospitalization due to dental trauma.[8]

8. Bharti Axa Smart Health This scheme covers dental care involving any accident. They do not include routine dental procedures.

9. SBI Life Smart Insurance Covers all dental expenses, excluding dental care for accidents.

10. LIC Health Protection Plus This scheme includes all incurred dental expenditures, and the individual might also combine family health coverage.[9]

Factors to Consider While Choosing a Dental Policy Plan

1. Coverage: Should know about the procedures covered in the scheme, like routine oral prevention, restorations, extractions, and root canal treatment.[10]

2. Premiums: What is the monthly or annual cost of the policy?

3. Provider network: Is your dentist part of the provider's network?

4. We should explore if there are any limitations on the policy's number of procedures per year.[11]

5. What procedures are excluded from the coverage? Also, the reputation of the company's customer service should be considered.

6. Easy claim process and company's quickness in providing reimbursement.[12]

Claim Process

1. One should review their dental insurance policy to understand the coverage and visit an empaneled dentist to receive the necessary treatment.
2. After receiving the detailed bill from the dentist, submit the claim form provided by the insurance company. Attach supporting documents, if any, and wait for processing.
3. The insurance provider will verify the claim and reimburse the covered amount.
4. Follow up with the insurance company if one is not reimbursed.[13]

Advantages of Dental Insurance

1. Tax Benefits: One can save up to 25,000 INR annually on health insurance. Furthermore, it is worth noting that there may be expenses linked to dental care.
2. Most insurance providers possess an extensive network of hospitals with which they have established partnerships. When dental services are rendered at the empaneled hospitals within this network, the insurance agency will pay the hospital.
3. By selecting a dental insurance plan, one can ensure that frequent visits to the dentist are facilitated. A dental insurance plan will safeguard our savings since numerous dental procedures are costly. Several insurance providers offer plans that encompass inpatient treatments and outpatient department services.[14,15]

CONCLUSION

Dental associations have endeavored to introduce a comprehensive dental health care insurance scheme. Nevertheless, it has not yet made any substantial progress.

Having dental coverage might facilitate disseminating dental healthcare awareness at the grassroots level. It would be a robust incentive for individuals to regularly visit the dentist, which, in turn, constitutes an effective preventive measure. To cultivate awareness and impart the advantages of dental longevity throughout society, the dental fraternity must advocate for policymakers to establish beneficial dental insurance schemes for the population.

FINANCIAL SUPPORT AND SPONSORSHIP

Nil

CONFLICTS OF INTEREST

There are no conflicts of interest

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