



ENROLLMENT FORM

*** PLEASE PRINT CLEARLY WHEN FILLING OUT THIS FORM ***

EMPLOYER INFORMATION (To be entered by company representative)

Employer Name: _____ Date of Hire: _____

Employer Address: _____ Employee Status: Hourly
 Street 1: _____ Salaried
 Street 2: _____ Retired

City: _____ State: _____ Zip Code: _____

ENROLLEE INFORMATION (To be filled out by employee)

Employee Name: _____ Date of Birth: _____

Employee Address: _____ Social Security Number: _____

Street 1: _____ Marital Status: Single
 Street 2: _____ Married

City: _____ State: _____ Zip Code: _____

WAIVER OF ENROLLMENT: I elect not to participate in the Plan at the present time.

Signature: _____ Date: _____

PLAN OPTIONS

<u>Select Plan Option(s) below:</u>	<u>Requested Coverage (select one):</u> <input type="checkbox"/> Employee Only <input type="checkbox"/> Employee & Spouse <input type="checkbox"/> Employee & Child(ren) <input type="checkbox"/> Family
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PERSON(S) COVERED:

Last Name	First Name	MI	Sex	DOB	SSN#	Relation	Student *
Employee:							
Dependents:							

* If a dependent is over age 19, you must submit proof of full-time enrollment at an accredited school, college or university.
 The Applicant represents that he/she has read each question and that the answers are complete and true to the best of his/her knowledge or belief. The proposed rates shall take effect as of the requested effective date if this application is accepted. In the event that the application is not accepted, any premium advanced shall be refunded.
Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information or conceals for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime and subjects such person to criminal and civil penalties.

Enrollee Signature: _____ Date: _____

Disclosure of Compensation Methodologies

Maryland law (COMAR 31.10.17.05) states that insurance companies are required to include a pie chart or bar graph depicting the proportion of every \$100 in premium dollars that the carrier uses to pay providers for the provision of health care services to enrollees, including what proportion is for direct medical care expenses, and the proportion of every \$100 in premium dollars that the carrier uses to pay for plan administration. Included in this administration kit is an updated version (as of December 1, 2009) of this disclosure for distribution to all enrolled employees.

The Health Care Consumer and Information Act, §15-121 of the Maryland Insurance Code requires the following disclosure.

Our compensation to dentists who offer dental care services to our insured members or enrollees may be based on a variety of payment mechanisms such as fee-for-service payments, salary, or capitation. Bonuses may be used with these various types of payment methods.

If you desire additional information about methods of paying dentists, or if you want to know which method(s) apply to your dentist, please call Denex Dental at 1-800-242-0450 or write us at 111 Rockville Pike, Suite 700, Rockville, MD, 20850.

Methods of Paying Dentists

The following table shows definitions of how insurance carriers may pay physicians for your health care services, with a simple example of how each payment mechanism works. The Maryland Insurance Administration requires this explanation. Although the examples do not involve dental benefits, the payment methods illustrated are applicable to your DENEX network providers.

Terms	The example shows how Dr. Jones, an obstetrician/ gynecologist, would be compensated under each method of payment
Salary -- A physician is an employee of the HMO and is paid compensation (monetary wages) for providing specific dental care services.	Since Dr. Jones is an employee of an HMO, she receives her usual bi-weekly salary regardless of how many patients she sees or the number of services she provides. During the months of providing prenatal care to Mrs. Smith, who is a member of the HMO, Dr. Jones' salary is unchanged. Although Mrs. Smith's baby is delivered by Cesarean section, a more complicated procedure than a vaginal delivery, the method of delivery will not have any effect upon Dr. Jones' salary.
Capitation -- A physician (or group of physicians) is paid a fixed amount of money per month by an HMO for each patient who chooses the physician(s) to be his or her physician. Payment is fixed without regard to the volume of services that an individual patient requires.	Under this type of contractual arrangement, Dr. Jones participates in an HMO network. She is not employed by the HMO. Her contract with the HMO stipulates that she is paid a certain amount each month for patients who select her as their doctor. Since Mrs. Smith is a member of the HMO, Dr. Jones' monthly payment does not change as a result of her providing ongoing care to Mrs. Smith. The capitation amount paid to Dr. Jones is the same whether or not Mrs. Smith requires obstetric services.
Fee-for-Service -- A physician charges a fee for each patient visit, medical procedure, or medical service provided. An HMO pays the entire fee for the physicians it has under contract and an insurer pays all or part of that	Dr. Jones' contract with the insurer or HMO states that Dr. Jones will be paid a fee for each patient visit and each service she provides. The amount of payment Dr. Jones receives will depend upon the number, types, and complexity of services, and the time she spends providing services to Mrs. Smith. Because Cesarean deliveries are more

fee, depending on the type of coverage. The patient is expected to pay the remainder.	complicated than vaginal deliveries, Dr. Jones is paid more to deliver Mrs. Smith's baby than she would be paid for a vaginal delivery. Mrs. Smith may be responsible for paying some portion of Dr. Jones' bill.
Discounted Fee-for-Service – Payment is less than the rate usually received by the physician for each patient visit, medical procedure, or service. This arrangement is the result of an agreement between the payer, who gets lower costs and the physician, who usually gets an increased volume of patients.	Like fee-for-service, this type of contractual arrangement involves the insurer or HMO paying Dr. Jones for each patient visit and each delivery; but, under this arrangement, the rate, agreed upon in advance, is less than Dr. Jones' usual fee. Dr. Jones expects that in exchange for agreeing to accept a reduced rate, she will serve a certain number of patients. For each procedure that she performs, Dr. Jones will be paid a discounted rate by the insurer or HMO.
Bonus -- A physician is paid an additional amount over what he or she is paid under salary, capitation, fee-for-service, or other type of payment arrangement. Bonuses may be based on many factors, including member satisfaction, quality of care, control of costs and use of services.	An HMO rewards its physician staff or contracted physicians who have demonstrated higher than average quality and productivity. Because Dr. Jones has delivered so many babies and she has been rated highly by her patients and fellow physicians, Dr. Jones will receive a monetary award in addition to her usual payment.
Case Rate – The HMO or insurer and the physician agree in advance that payment will cover a combination of services provided by both the physician and hospital for an episode of care.	This type of arrangement stipulates how much an insurer or HMO will pay for a patient's obstetric services. All office visits for prenatal and postnatal care, as well as the delivery and hospital-related charges are covered by one fee. Dr. Jones, the hospital, and other providers (such as an anesthesiologist) will divide payment from the insurer or HMO for the care provided to Mrs. Smith.

2009 DENEX DENTAL Provider Compensation

During the preceding year, 100% of the dentists under contract with DENEX were compensated using the discounted fee for service method of compensation, as illustrated above. No additional fees or bonuses were paid to any of its contracted dentists.

**Distribution of Each \$100 DENEX DENTAL Received in Premium Dollars
Proportion of Premium Dollars Spent for Year ended 12/31/09**

