Enrollee Newsletter

Fall/Winter 2022

Diabetes and Oral Health

People with diabetes face a greater risk of gum problems. The best way to protect against gum disease is to keep good control over your blood sugar. People who don't control their blood sugar will get gum disease more often. And they get it more severely.

Warning signs of gum disease

Visit your dentist if you have any of the following warning signs:

- Bleeding gums when you brush or floss
- Red, swollen or tender gums
- Gums that have pulled away from the teeth
- Pus between the teeth and gums
- Permanent teeth that are loose or moving away from each other
- Changes in the way your teeth fit when you bite
- Changes in the fit of partial dentures

There are often no warning signs of early gum disease. Symptoms such as pain and loose teeth do not happen until the late stages. So be sure to have regular checkups. Don't wait for something to hurt before you go to the dentist.





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Taking care of your teeth and gums

You can take important steps at home to keep your mouth healthy:

- Brush your teeth at least twice a day for about 2 minutes each time you brush.
- Use toothbrush with soft bristles
- Floss once a day
- Ask your dentist if you should have a fluoride rinse to help precent decay
- If you wear dentures, clean them every day.
- Take your dentures out when you sleep to help your gums stay healthy.

Diabetes can affect your dental treatment, as well as the health of your mouth. Work with your dentist on a treatment plan to meet your needs:

- Visit your dentist regularly
- Tell your dentist you have diabetes

Know someone without Dental Benefits, visit our site:

www.westerndental.com/en-us/insurance-financing/need-insurance DON'T WORRY, WE HAVE YOU COVERED!

Nondiscrimination Notice

The health plan does not discriminate on the basis of race, color, national origin, ancestry, religion, sex, marital status, gender, gender identity, sexual orientation, age, or disability.

You may also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil

Rights. Complaint forms are available at http://www.hhs.gov/ocr/office/file/index.html.

You can mail it to: U.S. Department of Health and Human Services 200 Independence Avenue, SW Room 509F, HHH Building Washington, DC 20201 Toll-free: **1-800-368-1019**

TDD: 1-800-537-7697

You can also send it electronically to a website through the Office for Civil Rights Complaint Portal at: <u>https://</u>ocrportal.hhs.gov/ocr/portal/lobby.jsf.

Language Assistance

Inquiries and Complaints

Available

Many Western Dental enrollees speak a language other than English or may prefer to speak another language when discussing their dental health or dental plan benefit matters. Currently Western Dental offers free language assistance to our members. To arrange for this free service, you or your dentist may call the Member Services department directly at **1-800-992- 3366** to arrange for an interpreter to join the call. Please allow some time for connection to this service.

Face-to-face interpreters in languages other than English (including Sign Language) may be available in some circum- stances. Vital Documents such as plan brochures provider directories important forms and letters about Western Dental services language rights and certain out- reach materials are currently produced in Spanish. For more information about Language Assistance contact **1-800-992-3366.**



Enrollees (members) are encouraged to contact Western Dental at 1-800-992-3366 regarding any concerns that they

- may have while obtaining services. Western Dental maintains a grievance process to address
- these concerns. Enrollee complaints or grievances can be made over the phone in person,
- at any Western Dental Provider Office, by obtaining a Western Dental Member Incident Form
- and submitting it to Western Dental, or by submitting the
- complaint using the Western Dental website at
- www.westerndental.com. Western Dental will send notification that the complaint has been re-
- ceived within five calendar days of receiving the complaint, and
- Western Dental will send a written response to the concerns within 30 days of receipt of the complaint.
- The California Department of Managed Health Care is
- responsible for regulating health care service plans. If you have a grievance against your
- Health Plan, you should first telephone your Health Plan at 1-
- ♦ 800-992- 3366 and use your Health Plan's grievance process
- before contacting the Department. Utilizing this grievance procedure does not
- prohibit any potential legal rights or remedies that may be available to you. If you need help with a grievance

involving an emergency, a grievance that has not been satisfactorily resolved by your Health Plan, or a grievance that has remained unresolved for more than 30 days, you may call the Department for assistance. You may also be eligible for an Independent Medical Review (IMR). If you are eligible for IMR, the IMR process will provide an im- partial review of medical decisions made by a Health Plan related to the medical necessity of a proposed service or treatment, coverage decisions for treatments that are experimental or investigational in nature and payment disputes for emergency or urgent medical services. The Department also has a toll-free telephone number (1-888-446-2219) and a TDD line

(1-877-688-9891) for

the hearing and speech impaired. The Department's Internet Web site at:

http:// www.dmhc.ca.gov

has complaint forms, IMR application forms, and instructions online.

Need help locating a contracted Primary Care Provider ("PCD")? Search our provider directory online at

www.westerndentalbenefits.com

Public Policy

The Plan welcomes member participation on its Public Policy Committee which meets quarterly. In order to be considered for membership please write or call the Plan's Member Services department at **1-800-992-3366.**

Disclosure of Review Processes

Upon request, WDS' Member Service Department will send you a copy of the guidelines and criteria that are used to determine if a service is covered or not when a dentist or WDS provider sends requests to WDS for benefits and/or claims for payment to an enrollee, a dentist, or a member of the general public. You may ask for this information by writing to Western Dental Services, Inc., P.O. Box 14227, Orange, CA 92863, or by calling WDS Member Services at 1-800-992-3366.