

DENTAL INSURANCE IN INDIA: AN OVERVIEW

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ABSTRACT:

Insurance has come of ages and has become the mainstay of payment in many developed countries. So much so that all the alternative forms of payment which originated as an alternative to fee for service now depend on insurance at one point or the other. Over the last 50 years India has achieved a lot in terms of General Health Insurance, but comprehensive Dental Health Insurance is almost non-existent. But with growing awareness about dental care among consumers there is a need for dental coverage. Dental insurance thus has a large untapped market and it's high time that more focus be given towards this potential by the insurance regulator, service providers and professional bodies. The present article is an attempt to focus on the available schemes on Dental Insurance in India.

Keywords: General Health Insurance, Oral Health Insurance, India.



INTRODUCTION:

In the early 20th century, dental insurance and dental benefit programs did not exist. Their emergence and rapid growth have helped to change the general perception of dentistry, transforming it in the public eye from a feared, undervalued profession into a regular and necessary part of health care, a vital part of the maintenance of overall quality of life. [1, 2, 3]

With the advent of the 21st century and the stability in the Indian economy, the dental insurance prospect of business remains unexplored. The Government of India and its policies are to be blamed for this sector to be left out. Due to the large population of the country, insurance sector needs foreign collaboration in order to cover all aspects of insurance. The Foreign Direct Investment (FDI) Bill which was put forward in the winter session of the parliament (2008) focused on increasing the

FDI investment share from 26% to 49%.^[4] This will act as an impetus to the multibillion dollar international insurance companies to enter the Indian market and subsequently cover all aspects of insurance in India.^[5]

In India if dental insurance is made available for all, people would be more than ready for seeking preventive and prophylactic dental care, thus reducing the burden of dental diseases and avoiding the expenses of future dental treatment. India is a country with a very price sensitive market. So being insured would be a boon for one and all. This prompted to do an update of various dental insurance options available in India.

REVIEW:

The process of dental insurance involves four parties; the patient, the group

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or program sponsor, the dental benefits carrier and the dentist.

1. Patient: In the past, most people sought dental treatment only when they were in pain or for emergencies. Now, individuals who were not motivated to seek treatment are going to the dentist because they have dental benefits, and they continue treatment once they learn how important regular dental care is to maintaining good overall health.

2. Group or Program sponsor (e.g.: employer, union or business association): This group generally is represented by a benefits manager, who is responsible for purchasing the most comprehensive benefits plan at the lowest price.

3. Dental Benefits Carrier: This may be an insurer, a third party administrator (TPA), or a dental service corporation. The group selects the benefits, levels of coverage and payment model, and the carrier administers the program.

4. Dentist: Most dental offices work closely with carriers to help patients make the best use of their benefits. The dentist's primary commitment is to discuss and render necessary treatment, to establish and maintain the patient's oral health, and to adhere to the standards of care that prevail in the professional community.

For the process to succeed, a system of communication and information sharing must connect all four parties. The dental office administrative assistant is a key partner in this process. The administrative assistant communicates with the dentist

regarding services, coding and fees for treatment; with the patient to verify carrier information, benefits and payment acceptance; and with the carrier for billing, payment and benefit information. This job requires organization, perseverance and strict attention to detail.^[1, 3]

Dental Health Insurance in India:

Currently, insurance companies offer limited coverage for a few dental procedures under general health insurance plans. Most insurance covers are only for dental treatment involving 24 hour hospitalization or life threatening situations. There is no comprehensive stand alone for dental treatment.^[6, 7]

There are many insurance policies available in India. Though the policies and features differ from one company (delete) one company to another, there are some common and generalized features of dental insurance in India.^[6]

The various plans available in India are

- Stand alone
- Dental insurance in collaboration with General Health Insurance
- Fee for service

Stand alone dental insurance plan^[8]: It covers the expenses such as periodontitis and extraction of permanent teeth due to caries etc. In this plan, the amount of expense to be reimbursed as well as the period of such cover is fixed. The plan is generally provided by the popular dental care product companies in association with one of the insurance companies.

Dental insurance in collaboration with General health insurance^[8]: This is provided by the general insurance companies as part of their own general health insurance schemes, such as health advantage policy or student medical policy. Through this scheme, one can claim dental expenses along with other kinds of reimbursements such as cost of medicine or hospitalization. This plan also offers tax benefits up to a certain fixed amount under the income tax act.

Fee for service dental insurance coverage^[8]: This accounts for certain percentage of savings on the charges claimed for dental treatment procedures.

- The person covered under the dental insurance policy can visit the dentist concerned and pay a discounted service and consultancy charge.
- Freedom to change the dentist licensed by the insurance company according to his/her preferences and conveniences without even notifying the insurance company.

Dental Insurance Schemes in India:

Hindustan Lever (HLL) on 9th October 2002 had announced the launch of what is considered the first of its kind dental insurance scheme. 'Pepsodent Dental Insurance' in partnership with New India Assurance wherein every purchase of pepsodent toothpaste enabled the customer to get Rs.1,000 worth of free dental insurance. Under this initiative, pepsodent offered consumers insurance

cover against expenses for the extraction of a permanent tooth due to severe caries and periodontitis, including cost of medication. However, the policy did not compensate claims for cosmetic dentistry or loss of tooth due to accidents. Besides, the age limit of the consumer had to be up to 50 years. This scheme has been discontinued as of today.^[9]

ICICI Lombard Dental Insurance cover is a plan included in the health advantage plus policy of general health insurance by ICICI Lombard. A first in India, Health insurance plan that reimburses dental consultation and treatment charges under outpatient treatment and treatment charges can be claimed only once during the period of insurance. The age of entry for the policy is up to the age of 65 years and renewable up to the age 70 years. The reimbursement under OPD cover can be a maximum of up to Rs.9,500 depending on the age. All dental treatment covered on OPD basis except cosmetic treatment-braces in teeth, teeth fixation and teeth whitening.^[10]

Apollo DKV Health Insurance in its Easy Health Premium plan does cover dental treatment on outpatient cover basis up to maximum of Rs.5,000 but with a waiting period of 3 years.^[11]

Insurance Fraud:

It is illegal to misrepresent treatment or to inaccurately report fees and dates of service to benefit carriers. The following actions, whether deliberate or unintentional, constitute fraud:

- Billing the benefits carrier for higher fees than the patient is charged.
- Billing before completion of service.
- Predating or post dating services on claim forms (patient's insurance has expired and dentist alters the date on the claim form so that the patient enables to get benefits).
- Improperly reporting treatment (e.g.: listing a bony extraction instead of a simple extraction).
- Billing for services not rendered.
- When a patient's dental fee is covered by two insurance carriers requiring the co-ordination of benefits. At the end of the treatment dentist gets the reimbursement from both the insurance company and he doesn't return the overpayment).

Accuracy and honesty are crucial. Administrative assistants who help defraud benefits carriers may be liable to legal prosecution.

CONCLUSION:

India is the largest democracy and second most populated country in the world and more than 70% of Indians resides in villages. Dentistry faces serious problems regarding accessibility of its services to all of India but the major missing link is the absence of a primary health care approach. To address this problem oral physician, insurers, NGO and other stake holders such as consumers and most importantly central and state legislatures will have to work together.^[8]

Indian Dental Association has been striving to bring out a new all inclusive oral and dental health care insurance scheme. However, it has been unable to achieve anything substantial on this front.

Dental insurance can bring about oral health care awareness percolating at the grass root levels. It would serve as a good motivation to the people to regularly visit the dentist and this in turn serves as an effective preventive measure.^[13] If we have to create awareness and pass on the benefits of longevity of teeth across the society, dental profession should impress on to the policy makers to have beneficial dental insurance schemes for the masses.^[5]

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