

1. IS BEAM'S NETWORK LARGE AND NATIONWIDE?

Beam has partnered with Dentemax (and First Dental Health in California) as its primary network partners. This national network includes 270,000 trusted provider access points in all 50 states, comparable to any major carrier. We also offer 90th percentile UCR on all plans, ensuring strong out of network benefits in cases where the client wants to ensure a strong benefit regardless of dentist choice.

2. WILL DENTISTS KNOW WHO BEAM DENTAL IS WHEN EMPLOYEES SCHEDULE VISITS?

Beam helps members easily communicate their eligibility and proof of insurance coverage:

1. Eligibility/Proof of Insurance Status
 - a. Members or dentist office staff can call Beam at (800) 648 1179 to confirm coverage.
 - b. OR, they can use Beam's app to confirm eligibility status.
2. The Summary of Benefits is sent to every employee and we encourage them to forward to their dentist. This info can also be found in the Beam Dental app.

3. NETWORK

When a member goes to a dentist *IN* our network, simply show the insurance card (digitally on the app, printed from the Beam portal, or physical card) to the office staff member. When a member goes to an *OUT* of network dentist or if the office wants to double check, the office can **confirm coverage by calling Beam at (800) 648 1179** and using the member's 10-digit subscriber ID (looks like this: 1234-56-7890) and their date of birth.

4. HOW DOES BEAM PRICING WORK?

Every member has access to our Beam Perks program, which delivers our connected Beam Brush right to the member's door for convenience and quick connection to our mobile app (via Bluetooth). Beam has found that our Beam Perks helps 'nudge' our members toward better preventive habits, which in turn reduces the frequency of certain dental interventions, allowing Beam to **return the savings to the client**.

5. HOW DOES BEAM PROCESS CLAIMS? YOUR REIMBURSEMENTS TO DENTISTS?

Beam is a licensed TPA and processes all claims based on either our network negotiated fee schedules or on usual, customary, and reasonable charges (UCR), which are in line with market. Beam uses industry data from FAIR Health, an independent third party, to build and maintain UCR tables.

6. OUR GROUP LOVES BEAM, BUT THE PERKS PROGRAM ISN'T A FIT... CAN WE OPT OUT?

No. However, the Beam Perks program is voluntary, and any member can choose to not opt in to the program. Or, they can opt out of our Perks program and just receive the base insurance product with the same excellent service & support.

7. WHAT IF I HAVE A QUESTION ABOUT MY VISION INSURANCE PLAN?

Beam handles all enrollment and billing for our vision policies, so all related questions will be handled internally. Any questions related to Claims and Support should be directed to **VSP at (800) 877 7195**.