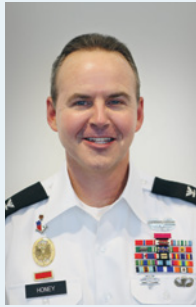


The Dentist Is In... Greetings and a Reminder from Col. James Honey, D.M.D., A.B.G.D.



*Col. James Honey
Chief, TRICARE Dental Care Section
Defense Health Agency*

Dear TRICARE Dental Program Beneficiaries,

I am excited to join the Defense Health Agency (DHA) as the new Chief of the TRICARE Dental Care Section.

While my career as an Army dentist has taken me from the deserts of Iraq to the forests of North Carolina, I am especially honored to serve you in my newest assignment at DHA in Virginia. I pledge to work tirelessly to safeguard access to quality dental care for our military community.

I would like to take this first opportunity to address something that is basic but critically important to your overall health—good oral hygiene. In addition to cavities and bad breath, there is a clear association between oral disease and several other serious conditions, according to the American Dental Association. Poor oral hygiene has been linked to heart disease, diabetes, serious infections and even strokes. Research continues on how oral hygiene influences and complicates serious conditions. Current data already suggests that caring for your mouth helps care for the rest of your body. That is why the simple acts of brushing twice a day and flossing once a day remain so important. Also, make sure to see your dental provider for regular checkups.

Giving your mouth attention can serve as an early-warning system by providing a window into your overall health. Over 90 percent of systemic diseases, including diabetes

and AIDS, can cause oral symptoms, according to the Academy of General Dentistry. For example, the appearance of lesions can alert your provider to a serious condition, then lead to quick treatment and a better outcome.

While I pledge to maintain and improve the care we provide to you, I ask that you pledge to practice good oral hygiene. The TRICARE Dental Program is about much more than a shining smile. Keeping your teeth and gums healthy is critical for a long, healthy and happy life. ■

Thank you,
Col. James Honey

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An Important Note About TRICARE Program Information: At the time of publication, this information is current. It is important to remember that TRICARE policies and benefits are governed by public law and federal regulations. Changes to TRICARE programs are continually made as public law and/or federal regulations are amended. For the most recent information, contact the TRICARE Dental Program contractor.

Your Dental Readiness Assessment and TRICARE Dental Program Eligibility

The Department of Defense requires all National Guard and Reserve members to undergo a yearly Dental Readiness Assessment. The *Department of Defense Active Duty/Reserve/Guard/Civilian Forces Dental Examination form (DD Form 2813)* is used to help National Guard and Reserve members in the TRICARE Dental Program (TDP) document their dental health. To download *DD Form 2813*, visit www.tricare.mil/forms.

TDP civilian network providers complete *DD Form 2813* at no additional cost to TDP beneficiaries. The National Guard or Reserve member is only responsible for:

- Getting the exam
- Providing the form to the dental provider
- Reporting the results to his or her service branch

National Guard and Reserve members are encouraged to contact their service branch representatives to determine their service-specific requirements for this document before scheduling yearly dental exams.

Sponsor and Family Eligibility for the TRICARE Dental Program

National Guard and Reserve sponsors may go on and off active duty several times throughout their military careers. The TDP offers continuous coverage to National Guard and Reserve sponsors and their family members. However, prior to activation, the sponsor's and family members' TDP

enrollment status is reviewed and a determination is made whether reenrollment is automatic or if it requires action. Additionally, the premium rate for sponsors and family members varies by sponsor status.

National Guard and Reserve sponsors are eligible to enroll in the TDP when they are not on active duty for more than 30 consecutive days. If a National Guard or Reserve sponsor enrolled in the TDP is called or ordered to active service for more than 30 consecutive days, his or her enrollment is automatically terminated from the program during the period of activation. During activation, National Guard and Reserve sponsors are considered active duty service members and get dental care through military dental clinics or the Active Duty Dental Program. Upon deactivation, the sponsor is automatically reenrolled in the TDP. A National Guard or Reserve sponsor is not considered part of a family plan and can be enrolled even if his or her family is not. The sponsor also has a separate monthly premium.

National Guard and Reserve family members can enroll in the TDP at any time, even if their sponsor does not enroll. The plan offers continuous dental coverage throughout the sponsor's changing status—from inactive status to active duty status and back again. During a National Guard or Reserve sponsor's activation, family members have reduced monthly premiums because they are considered active duty family members. ■

Dangers of Overbrushing Your Teeth

Brushing your teeth is an important part of good oral care, but you can overdo it. Brushing too often, too long or too hard can lead to tooth and gum sensitivity, gum erosion and loss of tooth enamel. These conditions can be permanent, may require surgery and can lead to other serious dental issues.

One common risk factor for overbrushing is using a hard-bristle toothbrush, according to the American Dental Association (ADA). The ADA recommends using a soft-bristle toothbrush with the ADA Seal of Acceptance. Brush and massage your teeth without scrubbing or applying too much pressure.

To avoid overbrushing, the ADA also recommends that you brush twice a day for two minutes and consider the following:

- Place your toothbrush at a 45-degree angle to the gum line when brushing.
- Move your toothbrush back and forth in short, gentle strokes that are about the width of a tooth. Brush the outer, inner and chewing surfaces of your teeth.
- Clean the inside surfaces of your front teeth by tilting the brush vertically and making several up-and-down strokes.
- Don't forget to brush your tongue. Many people forget that removing bacteria from their tongue helps keep their mouth clean and prevents bad breath.

To ensure the health of your teeth, visit your dental provider every six months. ■

Understanding Your Dental Anesthesia Options

Dental anesthesia can reduce discomfort during dental treatment. The TRICARE Dental Program (TDP) may offer anesthesia with a dental service to help you feel more comfortable during the dental procedure.

Local anesthesia is typically administered to provide a more comfortable dental service and is included in the cost of the service being provided (not as a separate benefit). It is dispensed to a small area of the soft tissue in your mouth and comes in two forms: topical and injectable.

Topical local anesthesia is applied to help prevent pain on the oral tissue of your mouth. Your dentist may use a topical anesthetic to numb an area in your mouth before injecting a local anesthetic. Topical anesthetics can also soothe painful mouth sores, such as canker sores.

Injectable local anesthesia prevents discomfort in specific areas of your mouth during dental treatment by blocking nerve sensation and numbing your soft tissues.

General anesthesia is used to completely block pain sensation associated with more complex treatments.

General anesthesia puts you in a controlled state of unconsciousness or “deep sleep.”

The dentist or other health care professional delivering the general anesthesia must be licensed to provide the treatment in the state where the service is provided. Based on medical necessity, general anesthesia is covered under the TDP with the beneficiary responsible for a 40 percent cost-share. Additionally, for dental treatment provided to beneficiaries with developmental, mental or physical disabilities and/or children until reaching age 6, the TRICARE medical benefit covers general anesthesia services with no cost-share. Under this benefit, reimbursement for general anesthesia is based on your TRICARE medical program (for example, TRICARE Prime or TRICARE Standard).

To limit out-of-pocket costs, contact your TRICARE regional contractor for benefit information before getting these services. Visit www.tricare.mil/contactus for contact information. For more information on covered dental services, visit www.tricare.mil/dental. ■

Your New TRICARE Dental Program Plan Year Begins May 1

Under the TRICARE Dental Program (TDP), you may get preventive, diagnostic and other dental care throughout the course of the year. It is important to understand how the timing of when you get care may impact your coverage. Each plan year begins May 1 and ends April 30. That means on May 1, 2016, your TDP benefit year restarts. Also, keep in mind that even though a new plan year does not begin until May 1, premium rates change yearly on Feb. 1.

There is a \$1,300 annual maximum benefit per beneficiary, per plan year, for non-orthodontic services. This maximum applies to the plan year from May 1–April 30. Payments for certain diagnostic and preventive services are not applied toward your annual maximum.

Time periods between or frequency of routine oral exams, cleanings, bitewing X-rays and topical fluoride treatments are based on the month the service was received and are measured backward from the date of the most recent service in each category. These time periods are not related to the May 1–April 30 plan year and may vary based on each beneficiary’s coverage effective date.

For example, if you enrolled in the TDP in May 2016 and got a cleaning on May 13, 2016, and again on Jan. 10, 2017, you would be eligible for the next cleaning on May 1, 2017. If you choose to have a cleaning in April 2017, that would be the third cleaning within a consecutive 12-month period and would not be an allowable charge. The third cleaning in a 12-month period would not be covered because it is in excess of the two allowable cleanings in a consecutive 12-month period, unless additional cleanings are allowed under other coverage rules (for example, pregnancy or diabetes).

Check your dental explanation of benefits to confirm when the services you got were covered. This will allow you to determine your expected cost-share when you schedule the service again and when you should make your next appointment. For more information, visit www.tricare.mil/tdpcosts. ■

Go Green and Register Your Email To Get Updates from TRICARE

In an effort to reduce health care costs and “go green,” the Defense Health Agency has reduced its use of paper communications. You may now get health and dental benefit notifications from the Defense Manpower Data Center by email instead of postal mail. Your email will direct you to <http://milconnect.dmdc.osd.mil>, where you can securely access your personal information. This means you are notified quickly and have convenient access to important benefit information. Your email address must be on file in milConnect to get email notifications. If you do not want to get email notifications of benefit changes, you may opt out.

If you do not have an email address on file or if you opt out of email notifications, you will get a postcard in the mail whenever your benefit information changes. The postcard will direct you to log in to milConnect to view your personal information with details about your benefit change.

To sign up for eCorrespondence:

- Log in to milConnect (a Common Access Card, Defense Finance and Accounting Service myPay PIN or Department of Defense Self-Service Logon [DS Logon] is required to log in)
- Click on the “My Profile” menu
- Select “Update and View My Profile”
- Add your primary and alternate (if available) email addresses
- Select “Yes” next to each email address
- Save your information by clicking “Submit”

Once you are registered to get eCorrespondence, you will get an email message from milConnect each time you have a letter or other information available to read online. In some cases, you will be able to view eCorrespondence through milConnect using your DS Logon for up to six months after losing TRICARE eligibility (for example, resulting from a sponsor’s separation from active duty).

To view your eCorrespondence:

- Log in to milConnect
- Click on the “eCorrespondence” menu
- Select “Read eCorrespondence”

If you have any issues with accessing eCorrespondence, click on “Help” at the bottom of the page. You can also send an email to DMDCeCorrespondence@mail.mil for assistance. Include the approximate time you visited the eCorrespondence page in your email.

Sign Up for Email Updates from TRICARE

You can also get the most recent news and information about your TRICARE benefit delivered directly to your inbox. Sign up to get email updates about health, dental and pharmacy benefit changes; the *TRICARE Dental Health Matters* newsletter; special topics and disaster alerts; and healthy-living tools, such as tobacco-cessation resources. To sign up, visit www.tricare.mil/subscriptions and provide your email address, then select the topics that interest you. ■

Preventive and Diagnostic Dental Health Coverage

Your teeth and gums need to be cared for with routine brushing, flossing and regular cleanings by your dental provider. The TRICARE Dental Program (TDP) offers preventive dental care to you at no additional cost when you visit a network provider.

All TDP beneficiaries may get two routine cleanings within a consecutive 12-month period. For pregnant women and people with diabetes, three cleanings are covered each consecutive 12-month period. Other preventive dental care may be covered when you see a provider for a specific dental problem or service, such as fillings or surgeries on the gums or teeth. Cost-shares may apply.

To help promote your dental health, two fluoride treatments are covered within each consecutive 12-month period.

Additionally, space maintainers for molars are fully covered without cost-shares for patients up to age 19. Other dental treatments, including mouth guards, surgeries and X-rays, may also be covered under diagnostic services and other benefits, and may include applicable cost-shares.

Frequency limitations for routine oral exams, cleanings, bitewing X-rays and topical fluoride treatments are based on the month of service and are measured backward from the date of the most recent service. These frequency limitations are not related to the standard TDP May 1–April 30 plan year and may vary based on your specific coverage effective date. ■

Getting Dentures?

If you have lost some or all of your natural teeth because of gum disease, tooth decay or other reasons, dentures can offer a solution. If you are considering dentures, it is helpful to understand your options.

Complete Dentures

If you have lost all of your teeth, complete dentures may be your best option. There are two types of complete dentures: conventional and immediate.

Conventional dentures are made and placed in your mouth after any remaining teeth have been removed and your gums have healed—a process that can take several months.

Immediate dentures are made from individual molds of your jaw and then inserted immediately after the removal of any remaining teeth. The advantage with this type of denture is that you will have teeth during the healing process. However, bones and gums can shrink while healing, which means your dental provider may need to adjust your dentures for proper fit after healing is complete.

Partial Dentures

If you have lost some of your teeth, you might want to consider partial dentures. There are two types of partial

dentures: removable and fixed. Removable partial dentures are made of artificial teeth attached to a gum-colored plastic base, which may be connected by either a metal or plastic framework. These dentures attach to your natural teeth with metal clasps or devices called precision attachments, and you can remove and clean them yourself.

Fixed partial dentures, often called bridges, are made of gold, alloys, porcelain or a combination of those materials and are secured to the surrounding teeth. The success of fixed partial dentures depends on the support of the surrounding teeth. Unlike removable partial dentures, fixed partial dentures can only be removed by a dental provider.

TRICARE Dental Program Denture Coverage

If you believe you may benefit from dentures, your dental provider can advise you on your options. Removable, complete and partial dentures are covered under the TRICARE Dental Program (TDP). Your cost-share percentages will vary depending on sponsor pay grade and location. For more information, visit the TDP website at www.metlife.com/tricare. ■

Your Dental Benefits during the Transitional Assistance Management Program

If your sponsor is leaving active duty and receiving medical care coverage under the Transitional Assistance Management Program (TAMP), you may still be eligible for dental coverage with the TRICARE Dental Program (TDP).

While service members covered under TAMP are ineligible for the TDP, their dependents may remain eligible.

Eligibility is determined by the sponsor’s military status reflected in the Defense Enrollment Eligibility Reporting System (DEERS). The table that follows describes family-member eligibility based on sponsor status. For more information, visit www.tricare.mil/dental. For cost information, visit www.tricare.mil/costs. ■

Sponsor Status	Family-Member Eligibility
Sponsor is leaving active duty	Family members can’t get TDP coverage once the sponsor’s status in DEERS changes. Family members can get dental care at a military dental clinic on a space-available basis.
Sponsor is transitioning from active duty directly into the National Guard or Reserve	Family members can purchase or continue TDP coverage.
Sponsor is a member of the National Guard or Reserve returning to non-active duty status after activation for more than 30 days	Family members can enroll in the TDP at any time or continue current coverage.

Tooth Sealants Offer Protection for Your Children's Teeth

A dental sealant is a plastic material that is applied to the chewing surfaces of the back teeth (molars) to prevent cavities. This material acts as a barrier so cavity-causing bacteria cannot enter the pits and grooves in the chewing surfaces of the teeth.

Applying Sealants

Sealants are quick and easy to apply. The dental provider cleans and prepares the teeth with a solution to make the plastic stick. The plastic is then painted on the teeth where it hardens.

Benefits of Sealants

According to the Centers for Disease Control and Prevention, most cavities in children occur in teeth that have pits and

grooves. Two-thirds of those cavities occur on the chewing surfaces. Research shows that dental sealants help prevent cavities on teeth with pits and grooves. It is recommended that dental sealants be placed on the permanent molar teeth of children shortly after the molars erupt. The first permanent molars erupt in children around age 6, with the second set of permanent molars appearing around age 12.

Sealant Coverage

Sealants placed on permanent molars are covered under the TRICARE Dental Program for beneficiaries up to age 19. The teeth must be cavity-free with no previous restoration. One sealant per tooth is covered in a three-year period. Sealants for teeth other than permanent molars are not covered. For more information, visit www.tricare.mil/tdp. ■

Know the Effects of Grinding Your Teeth

If you grind your teeth, you could be causing lasting damage and may need a mouth guard or splint prescribed by your dental provider.

The condition, called bruxism, often causes problems when it occurs at night. It can be noisy enough to bother sleeping partners, but can also lead to headaches, jaw pain, insomnia, depression, receding gums and even fractured teeth, according to the National Institutes of Health (NIH).

There is debate about the exact cause of bruxism, but stress is a commonly cited factor. Misaligned teeth can also contribute to the condition. While you can combat bruxism during waking hours by making a conscious effort to relax facial muscles, it can be more challenging to treat when it occurs during sleep.

Managing stress and using relaxation techniques is a good start, but the NIH recommends the following self-care treatments to cope with discomfort caused by bruxism:

- Relax facial and jaw muscles during the day.
- Avoid hard foods and chewing gum.
- Drink plenty of water.
- Apply ice or heat to sore jaw muscles.

Sometimes self-treatment isn't enough. You should visit your dental provider if you have persistent jaw or tooth pain.



Your dental provider may prescribe a mouth guard or splint to protect your teeth from the strain of clenching. There are many types of mouth guards and splints. Most either provide a cushion between your teeth, or reduce clenching by keeping your jaw in a relaxed position as you sleep.

If you have persistent jaw pain when you wake up, see your dental provider. ■



Word Search

R	F	Q	C	P	Z	T	U	S	F	B	H	T	T	F
S	H	I	A	X	F	E	M	L	I	U	C	D	E	O
E	C	I	T	L	E	E	U	Y	I	I	I	W	E	M
E	X	A	O	Z	X	O	W	H	Q	V	P	L	T	V
I	E	S	V	U	R	W	P	L	X	Y	E	J	H	H
C	S	J	H	I	H	S	U	R	B	M	C	J	Z	M
T	W	C	D	L	T	T	B	M	A	W	J	V	S	S
T	L	E	U	P	Y	Y	U	N	F	S	E	G	R	Y
V	F	G	W	L	G	H	E	O	P	W	R	L	A	T
B	R	A	C	E	S	J	T	O	M	U	X	N	L	H
C	T	S	I	T	N	E	D	L	R	K	H	L	O	S
W	M	Q	W	L	M	V	E	B	A	F	T	B	M	M
P	E	U	S	U	Q	J	C	N	V	E	P	E	E	U
R	I	V	Y	B	D	M	Z	P	C	J	H	F	B	G
E	W	X	S	I	H	B	I	U	M	G	U	H	H	W

BRACES—used to straighten your teeth

BRUSH—twice a day to keep your teeth and gums healthy

CAVITY—tooth decay that forms when the enamel on your teeth breaks down

DENTIST—the doctor you visit who helps you keep your teeth clean and healthy

ENAMEL—the hard outer layer of your teeth

FLOSS—thin string that helps remove food debris and plaque between your teeth

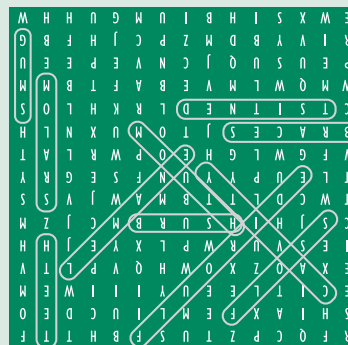
FLUORIDE—added to tap water in many towns and cities; strengthens your teeth and protects them from decay

GUMS—the tissue in your mouth that holds your teeth in place

MOLARS—large flat teeth at the back of your mouth for grinding food

MOUTH—contains your teeth, gums and tongue and is a critical part of your overall health

TEETH—hard objects in your mouth for biting and chewing



Answers

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Moving with the TRICARE Dental Program

Moving can be a stressful task filled with lots of challenges, but finding a new dentist with the TRICARE Dental Program (TDP) is easy.

When you move, update your address in the Defense Enrollment Eligibility Reporting System (DEERS) at <http://milconnect.dmdc.osd.mil>.

Then, visit www.metlife.com/tricare and enter your new ZIP code in the “Find a Dentist” box on the right to find a MetLife Preferred Dentist Program (PDP) provider in your new area. In the U.S., you can visit any licensed and authorized dentist. But, you may save time and money by seeing a PDP provider who agrees to MetLife’s allowable charges.

Seeing a non-network provider could mean:

- You are billed the full cost.
- You may have to file your own claims.
- You must pay the cost-share, plus any charges in excess of MetLife’s allowable charge.

To ease your transition to a new dental provider, be sure to get copies of your dental records before moving. This can help you avoid additional dental expenses at your new location.

If you are moving outside the U.S., you may end your enrollment in the TDP within 90 calendar days of relocating. ■

TRICARE Dental Program Resources

www.metlife.com/tricare

Enrollment and Billing Services

1-855-MET-TDPI
(1-855-638-8371) (CONUS)

1-855-MET-TDP2
(1-855-638-8372) (OCONUS)

1-855-MET-TDP3
(1-855-638-8373) (TDD/TTY)

Claims Filing

CONUS:
MetLife TRICARE Dental Program
P.O. Box 14181
Lexington, KY 40512

OCONUS:
MetLife TRICARE Dental Program
P.O. Box 14182
Lexington, KY 40512

Beneficiary Web Enrollment

www.dmdc.osd.mil/appj/bwe

NE311BET03160DE