



MDIS Missouri Dental
INSURANCE SERVICES

**Honest Answers.
Practical Solutions.
*Personal Service.***

MDIS IS A SUBSIDIARY OF THE MISSOURI DENTAL ASSOCIATION

Insurance for the Practice

PROFESSIONAL LIABILITY [Malpractice]:

Protects and represents you for the treatment you are providing to your patients if a malpractice claim is filed against you. Risk managers are available to assist you with any patient care situations or risk management issues that may help you avoid a lawsuit. When it comes to medical malpractice insurance, you have two coverage types: Claims-Made or Occurrence.

ENTITY MALPRACTICE [Corporation, LLC, Partnership]: Protects your entity for the vicarious liability of your affiliated dentists. For example, "Tooth Dr LLC" may be named in a lawsuit for malpractice along with Dr. John Tooth and the associate Dr. Jane Deere. There are two ways to protect your entity: shared or separate limits, depending on practice set up.

BUSINESS OWNERS INSURANCE

[General Liability, Building, Contents]:

Protects your practice against losses resulting from physical damage. This type of policy may contain coverage to repair or replace your building and/or its contents, and general liability. It's imperative a practice owner has this policy to protect from such losses. A covered cause of loss may bring on costs which can be hard to recover from financially.

WORKERS' COMPENSATION: Provides coverage for work-related injuries sustained by the insured or employees. Health insurance does not provide coverage for work related injuries. Therefore, without workers compensation coverage in place the employer is responsible for medical expenses out of pocket. In Missouri, a Workers' Compensation policy is based on payroll.

DATA BREACH/CYBER LIABILITY: Your practice could be a victim of data breach by way of ransomware, phishing, data leakage, hacking or numerous other threats. Going without Data Breach coverage means you personally take on the financial responsibility of a breach, which could include credit monitoring for patients, IT forensics, or costs to notify patients, to name just a few. The costs may be staggering for any size practice. Coverage includes notification expense and credit monitoring reimbursement (first

party coverage), and provides liability coverage for defense and regulatory actions (third party coverage). (This is not an all-inclusive list.) Standalone coverage is recommended because coverage may be broader and pricing is more competitive than simply endorsing another policy to include data breach/cyber liability.

EMPLOYMENT PRACTICE LIABILITY INSURANCE: Offers valuable coverage protecting a practice owner against employment-related issues such as; discrimination, harassment, failure to hire or promote, wrongful termination—as well as several other types of employment-related claims. Do not assume this cannot or will not happen to you; it happens to many business owners ... and often, the employer has done nothing wrong. It is possible for a claim be triggered simply by a false accusation. If you were accused by an employee for any of the previous examples, would you have adequate coverage to protect your practice?

RENOVATION/BUILDER'S RISK: A practice owner who is renovating office space may need renovation insurance to cover losses during the renovation process. A practice owner who is constructing a new building (from the ground up) may need builder's risk coverage to protect from losses during construction. Standard business owner's policies do NOT cover these risks. Most lenders will require coverage be in place prior to your loan being disbursed. Without coverage for either situation, a total loss may be your financial responsibility. Do not assume your contractor will cover you for losses; their coverage protects them, not you.

UMBRELLA: Provides additional liability protection when extensive losses occur. It is typically written over business owners, workers' compensation or commercial auto policies. Commercial umbrella provides excess limits when an underlying liability policy limit has been exhausted.

Health & Life Insurance

GROUP HEALTH PLANS: Save money and offer rich employee benefits as part of your employee benefits package. Whether it's a self-funded Chamber Benefit Plan or an ACA group

health plan, we'll help you choose networks and deductibles that best fit the needs of your employees. PPO, EPO and HSA plans are available. Participation must consist of two or more full-time employees, averaging 30+ hours per week. The employer is generally required to pay 50% of the employee-only premium.

INDIVIDUAL MAJOR MEDICAL: Whether on or off the exchange, individual family plans can look vastly different, depending on subsidy and cost-sharing eligibility. A majority of counties in Missouri offer multiple carrier options, with plan selection being highly dependent on network and providers available. All networks are EPO; an HMO hybrid. Applying outside of open enrollment requires a special enrollment period.

INDIVIDUAL SHORT-TERM MEDICAL PLANS: Are available with coverage durations from one month to nearly three years. Short-term plans are underwritten and NOT considered major medical coverage. Typically, pre-existing conditions, preventive and maternity are not covered on standard short-term plans with durations under 12 months. Longer duration plans may look and feel more like major medical. Deductibles range from \$1,000-\$12,500.

DISABILITY INCOME [Individual or Group]: Provides a source of replacement income if you are unable to work due to an illness or accident. No one knows when or how a disability may occur. Just as you would insure your car, home and other valuable assets, you need to insure your income in case you're no longer able to work. Getting disability insurance as early as your third year in dental school is advised, as the cost of individual coverage is based mainly on your age and health. Putting a policy in place early will lock in the rate you will pay as long as you keep the individual policy active. Be sure that an "Own Occupation" rider is included in your policy to ensure you are paid benefits when not able to work in your trained occupation. For example, if you are sick or disabled but still able to work delivering pizzas, you would not qualify for disability payments without the "Own Occupation" rider.

BUSINESS OVERHEAD EXPENSE INSURANCE: Pays the overhead expenses of your office while you are disabled—including rent payment,

employee salaries and benefits, utility bills, insurance premiums and more. This coverage is extremely important to you as a practice owner because bills will not stop coming in just because you are disabled. Obtaining this coverage may help keep your practice, staff and finances stable.

LIFE INSURANCE [Individual or Group]: Does your family depend on your income? If so, do you have enough life insurance to allow your family to maintain their standard of living on just your spouse's income (if they have one)? Setting up coverage as young as possible will allow you to lock in a desirable rate, as rates are based on age and your health. You may be denied for coverage if you are in poor health. Typically, when purchasing a practice, lenders may require you to carry life insurance to cover your loan in the event of your death.

HEALTH REIMBURSEMENT ARRANGEMENT (HRA): Enhances and provides benefits with a group health plan or instead of a group health plan. With several HRA types to choose from, one may work for you and your employees. For any HRA, you must have a written plan in place that will comply with government regulations.

CAFETERIA PLAN: Allows employees to withhold a portion of their salary on a pre-tax basis to cover the cost of group health insurance premiums or qualifying supplemental benefit premiums that are part of an employer-sponsored plan. To withhold any deferrals from an employee's paycheck, you must have proper documentation in place.

COMPLIANCE WITH ERISA & HIPAA: Providing group benefits to your employees means you are required to comply with ERISA law. To remain in compliance, all employers must have certain policies and procedures in place to safeguard the security of electronically transmitted or stored PHI of employees and must provide the necessary HIPAA Privacy notices to employees. Having the proper written plan documents may help you get in compliance.

Medicare Plans

MEDICARE SUPPLEMENT PLANS: Can pick up where Medicare leaves off, so they work in conjunction with Medicare. Generally, there is

very little out of pocket when using a Medicare Supplement, depending on the plan. Insureds can see any provider accepting Medicare patients, nationwide. Eligibility requires both Medicare Part A and Part B; pair a Part D plan with a supplement to round out your benefits.

MEDICARE PART D: Part D prescription drugs are offered through independent carriers. Each plan offers a specific drug formulary and a specific network, which vary by carrier. Copays and tiers of drugs also vary by carrier. Eligibility requires entitlement to Medicare Part A and enrollment in Part B. If you do not purchase a Part D plan when eligible, you may pay a lifelong penalty when you do decide to purchase a Part D plan.

MEDICARE ADVANTAGE: Medicare Advantage (Part C) takes the place of original Medicare and is sold through independent carriers. These plans have low premiums; however, they may have higher out of pocket costs compared to Medicare Supplement plans. Medicare Advantage plans use specific networks. Many plans have built-in prescription drug coverage and value-added benefits such as dental, vision, hearing, gym membership and 24/7 nurse hotline.

Health Ancillary Plans

GROUP ANCILLARY: Add value to your health benefit package by including supplemental benefits. You can bundle vision, life or disability insurance to any employee benefit package. Group cancer and heart attack & stroke can also be a value-added benefit.

INDIVIDUAL ANCILLARY: We offer AFLAC products to help individuals in your office with options that fit their needs. These insurance options are done on an individual basis, but can be payroll deducted and billed on one invoice through the office. They have financial benefits that could help with services and other expenses if an unexpected diagnosis occurs. They do not, however, replace major medical insurance but instead enhance your coverage. Plans options can include accident, cancer, critical care protection, life, short term disability, hospital confinement, just to name a few.

Retirement Planning

401(K) RETIREMENT PLAN: The MDIS Multiple Employer 401(k) Program (MEAP) was created to help reduce your responsibilities as a plan sponsor. The MEAP aggregation of assets and administration often results in lower costs, and MDIS dynamic pricing structure may mean further cost reductions as your plan continues to grow. Sophisticated options allow a dentist the ability to design a retirement plan to meet their individual practice's unique business needs while the entire plan remains simple to administer.

PROFESSIONAL ALLIANCE INVESTING: MDIS is proud to offer Professional Alliance investment options through our trusted partner financial advisors. Through our trusted partners you have access to an advisor of your choosing to assist you with wealth management, student loan debt, retirement plans for your practice or retirement planning for yourself. Tell them MDIS sent you for a discount on their services.

ERISA BOND: Employee Retirement Income Security Act (ERISA) requires the purchase of a fidelity bond to cover theft of plan assets, ERISA also mandated that fiduciaries may be personally liable for breach of certain responsibilities or duties imposed upon them under the law. This plan is designed to protect the plan and its participants against fraud or dishonesty by the bonded trustee. The amount of the bond must be at least 10% of the plan assets. However, the bond must be at least \$1,000 but does not need to be greater than \$500,000 unless prescribed by the Secretary of Labor. ERISA requires each fiduciary or any other person who handles funds on behalf of the plan to carry adequate coverage.

LONG-TERM CARE INSURANCE: Unsure as to whether or not you are prepared with a plan to address a long-term care need that could last for several months or many years? Long-term care insurance is a product designed to help pay for nursing-home, home-health care or personal care for an insured. Rates are based on age, health, desired benefit amount and coverage (rider) selection. Many policies will offer a variety of optional riders that may be used to customize your policy or enhance current policy coverages. Needing long-term care may impact your loved ones, assets and retirement.

Meet Your MDIS Team



Jerri Wildhaber

Operations Director

Contact Jerri to learn more about Malpractice for the doctor or the practice, Cafeteria Plan options or setting up a Health Reimbursement Arrangement.



Lindsey Kutscher

Practice Insurance Manager

Contact Lindsey to learn more about the coverages you need when buying a practice: Business Owners Policy, Workers' Compensation, Data Breach Insurance, Employment Practices Liability, Disability or Life Insurance.



Christy Diehl

Health Insurance Manager

Contact Christy to learn more about coverages available in the health insurance market: Individual or Group Health Plans, Medicare Supplement options or Ancillary Health Plans available through AFLAC.



Whitney Whitson

Client Services Associate

Whitney if you have questions about any of your policies, need a copy of your insurance declaration, making a payment, starting a change request or any other matters. She can help answer your questions or direct you to the right agent to assist you!



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We are committed to providing you with insurance products for your family, your practice, your staff and their families. We work with many companies across all of our lines of business, giving you options for your insurance needs. Customer Service is important to us, and our team of licensed agents are here to assist you. In addition to Missouri, we can assist dentists with insurance products in the states of AR, CO, FL, IA, IL, IN, KS, MI, OH, OK, TN, TX and VA.