

## Dental Benefits Summary for APSCURF

Effective Date: February 1, 2019

Network: Advantage Plus

Benefit Category <sup>1</sup>	CONCORDIA FLEX PLAN	
	In-Network <sup>2</sup>	Non-Network <sup>2</sup>
<b>Class I – Diagnostic/Preventive Services</b>		
Exams	100%	100%
Bitewing X-rays		
All Other X-rays		
Cleanings & Fluoride Treatments		
Sealants		
Space Maintainers		
Palliative Treatment		
<b>Class II – Basic Services</b>		
Basic Restorative (Fillings)	80%	80%
Simple Extractions		
Endodontics		
Nonsurgical Periodontics		
Complex Oral Surgery		
General Anesthesia		
<b>Class III – Major Services</b>		
Surgical Periodontics	50%	50%
Repairs of Crowns, Inlays, Onlays, Bridges & Dentures		
Inlays, Onlays, Crowns		
Prosthetics (Bridges, Dentures)		
<b>Orthodontics to any age</b>		
Diagnostic, Active, Retention Treatment	Not Covered	
<b>Included Plan Features</b>		
Preventive Incentive <sup>®</sup>	Class I services do not count toward your calendar year maximum	
Smile for Health <sup>®</sup> Maternity Benefit	Covers 1 additional cleaning during pregnancy	
<b>Maximums &amp; Deductibles (applies to the combination of services received from network and non-network dentists)</b>		
Calendar Year Program Deductible (per member)	\$50 Excludes Class I	
Calendar Year Program Maximum (per person)	\$1,500 Excludes Class I	
<b>Reimbursement in PA</b>	Advantage Plus	Advantage
<b>Reimbursement in all other States</b>		90 <sup>th</sup> Percentile

Representative listing of covered services – certificate of coverage provides a detailed description of benefits.

1. Unmarried dependent children covered to age 26. Unmarried dependent students covered to age 26.
2. Reimbursement is based on our schedule of maximum allowable charges (MACs). Network dentists agree to accept our allowances as payment in full for covered services. Non-network dentists may bill the member for any difference between our allowance and their fee (also known as balance billing). United Concordia Dental's standard exclusions and limitations apply.

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