

Dental Benefits Summary for Laundry and Dry Cleaning Workers TF

Network: Advantage

Benefit Category ¹	CONCORDIA PREFERRED PLAN	
	In-Network ²	Non-Network ²
Class I – Diagnostic/Preventive Services		
Exams	90%	50%
Bitewing X-rays		
Cleanings & Fluoride Treatments		
Palliative Treatment (Emergency)		
Class II – Basic Services		
All Other X-rays	70%	Not Covered
Sealants		
Basic Restorative (Fillings)		
Simple Extractions		
Space Maintainers		
Repairs of Crowns, Inlays, Onlays, Bridges & Dentures		
Class III – Major Services		
Endodontics	25%	Not Covered
Non-Surgical Periodontics		
Surgical Periodontics		
Complex Oral Surgery		
General Anesthesia		
Inlays, Onlays, Crowns		
Prosthetics (Bridges, Dentures)		
Included Plan Features		
Maternity Benefit	Covers 1 additional cleaning during pregnancy	
Maximums & Deductibles (applies to the combination of services received from network and non-network dentists)		
Contract Year Deductible (April 1 – March 31) per person/per family	\$25/\$75 Excludes Class I	\$100/\$300 Excludes Class I
Contract Year Maximum (April 1 – March 31) per person	\$1,250	\$500
Reimbursement	Advantage	Advantage

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

Dental plans are administered by United Concordia Companies, Inc., and underwritten by United Concordia Insurance Company. For more information please visit the “Disclaimers” link at www.UnitedConcordia.com. Administrative and claims offices located at 4401 Deer Path Road, Harrisburg, PA 17110 (1-800-332-0366).

These policies have exclusions and limitations which may affect any benefits payable. See the actual policy or your account representative for specific provisions and details of availability.

1. Dependent children 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.

The Plan complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex.

English	ATTENTION: If you speak English, language assistance services, free of charge, are available to you. Call 1-800-332-0366 (TTY: 711).
Español (Spanish)	ATENCIÓN: Si habla español, le ofrecemos de ayuda lingüística gratuita. Llame al 1-800-332-0366 (TTY: 711).
繁體中文 (Chinese)	注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 1-800-332-0366 (TTY: 711)。