United Concordia[®] Dental

Protecting More Than Just Your Smile®

Dental Benefits Summary for Killeen ISD Base Plan (Low Plan)

Effective Date: January 1, 2023

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Benefit Category ¹	CONCORDIA FLEX PLAN	
	In-Network ²	Non-Network ⁴
Class I – Diagnostic/Preventive Services		
Exams		
Bitewing X-rays		
All Other X-rays	100%	100%
Cleanings & Fluoride Treatments		
Sealants		
Space Maintainers		
Palliative Treatment		
Class II – Basic Services		
Basic Restorative (Fillings)	80%	80%
Simple Extractions		
General Anesthesia		
Oral Surgery		
Class III – Major Services		
Endodontics		
Nonsurgical Periodontics		
Surgical Periodontics	50%	50%
Repairs of Crowns, Inlays, Onlays, Bridges, Dentures		
Implants		
Inlays, Onlays, Crowns		
Prosthetics (Bridges, Dentures)		
ncluded Plan Features		
Preventive Incentive®	Class I services do not count toward your annual program maximum	
Pregnancy Benefit ³	Covers 1 additional cleaning during pregnancy	
	Covers 1 additional periodontal maintenance	
	Scaling and root planing	
	4 periodontal surgery procedures	
Smile for Health®Wellness³	 Covers 1 additional periodontal maintenance per year and all are covered at 100% Scaling and root planing are covered at 100% 4 periodontal surgery procedures are covered at 100% 	
Provides periodontal care for people with certain chronic medical		
conditions: diabetes, heart disease, lupus, oral cancer, organ		
transplant, rheumatoid arthritis and stroke		
Maximums & Deductibles (applies to the combination of s		
Annual Program Deductible (per person/per family)	\$100/\$200 Excludes Class I	
Annual Program Maximum (per person)		.000
Reimbursement	Elite Plus	Advantage MAC

Network: Flite Plus

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 (1-866-851-7568).

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 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.
- 3. Members (subscribers or covered dependents) with certain medical conditions must sign up for this program through **My Dental Benefits** on **UnitedConcordia.com**.
- 4. United Concordia creates out-of-network charges utilizing FAIR Health data supplemented with our charge data as appropriate. We then calculate the out-of-network charge at the maximum allowable charge of such data. Non-network dentists may bill the member for any difference between our allowance and their fee.