



Dental Benefits Summary for Wallingford-Swarthmore School District – Low Group # 074586000 **Network: Concordia Advantage**

Benefit Category ¹	CONCORDIA FLEX PLAN
	In-Network ²
Class I – Diagnostic/Preventive Services	
Exams	100%
Bitewing X-rays	
All Other X-rays	
Cleanings & Fluoride Treatments	
Sealants	
Space Maintainers	
Palliative Treatment	
Class II – Basic Services	
Basic Restorative (Fillings)	100%
Simple Extractions	
Endodontics	
Complex Oral Surgery	
General Anesthesia	
Class III – Major Services	
Inlays, Onlays, Crowns	50%
Prosthetics (Bridges, Dentures)	
Most Repairs of Crowns, Inlays, Onlays, Bridges & Dentures	
Nonsurgical Periodontics	
Surgical Periodontics	
Orthodontics for dependent children to age 19	
Diagnostic, Active, Retention Treatment	50%
Maximums & Deductibles (cumulative of network and non-network)	
Annual Program Deductible (per person/per family)	N/A
Annual Program Maximum (per person)*	\$1,000
Lifetime Orthodontic Maximum (per person)	\$800
Reimbursement	Advantage

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

*Annual Maximum excludes certain Surgical Services

1. Dependents 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. United Concordia Dental's standard exclusions and limitations apply.

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