



Dental Benefits Summary for Wallingford-Swarthmore School District – High Group # 074585000 **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)*	\$1,500
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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