



Dental

Quick reference guide

Dental benefits

Quick Reference Guide

PPO (Preferred Provider Organization) plan

- Large national network
- Substantial cost savings for in-network services
- No claim forms for network services
- Flexibility to see non-network providers at higher out-of-pocket costs

Dental INO (In-Network Only) plan

- Comprehensive coverage with fixed-dollar copayments
- Access to national PPO network
- Lower premiums due to absence of non-network coverage
- Emergency out-of-area coverage

Dental Indemnity plan

- No network — employees can choose any dental provider
- Employees pay at time of service and submit claim form for timely reimbursement
- No referrals needed to see a specialist
- Great option when network does not provide needed coverage in particular geographic area

DHMO plan

- Available in selected markets
- Out-of-network benefit limited to out-of-area coverage and emergency care up to limited amount
- Access to large cost-saving regional networks
- Low premiums and out-of-pocket costs due to provider discounts

Voluntary Dental

- Employee pays all or most benefit costs
- Lower employer costs — employer pays either administrative costs only or administrative costs plus smaller portion of premiums
- Network and non-network plans
- Covers routine care and other dental services
- Variety of plan offerings, all with focus on preventive services
- Requires at least two eligible employees to receive a quote
- Groups with fewer than 10 eligible employees must offer plans with waiting periods
- Those with 10 or more eligible employees may offer a plan with or without waiting periods
- Option for orthodontic coverage
 - Waiting periods apply to orthodontia in those plans that require waiting periods for comprehensive services

Dental dual option

- Eligible groups may offer multiple products and/or plan options. Employer generally funds low-coverage-level plan, and employees can buy up to higher-coverage plans if they desire richer benefits and/or greater access flexibility



If your clients think it is too costly to offer employee dental coverage, it's time to think about UnitedHealthcare dental. We offer a number of flexible — and cost-effective — plan designs that are supported by a large national and regional network and value-added services.

Our responsive team provides the guidance and support your clients need to go from enrollment to implementation and ongoing administration.

Expertise

Bridge2Health

- Designed to strengthen your business by improving the overall health of your workforce
- Because we offer both medical and dental benefits, our Bridge2Health approach allows us to provide information and services that help employees understand the connection between their oral health and their overall health. Understanding this connection may help them to take better preventive care of their teeth and gums, avoiding costly treatments down the road and potentially allowing employers to experience less absenteeism and greater productivity
- **FlexAppeal Enhanced:** Optional. Covers white fillings on back teeth, dental implants and expanded coverage for adults, including any combination of four preventive visits and gum treatments during a 12-month period. Required participation is 10 or more members
- **Prenatal dental care:** Included at no additional charge. Expectant mothers qualify for additional periodontal coverage with no premium increase, copayment or deductible
- **Oral cancer screening:** Adults receive screening once a year at the discretion of their dentist, with no premium increase

Strong networks

- Extensive network of dentists and specialists
- Providers undergo ongoing quality measurement based on National Association of Dental Plans credentialing standards

Claims management

- Automated claims adjudication
- Timely and accurate claims payment
- Built-in audit features

Available with PPO, INO and Indemnity plans

- **Consumer MaxMultiplier®:** Optional. Members may earn additional coverage dollars for annual dentist visits. If unused, award dollars can be rolled over to the next benefit year. Required participation is two or more members when there are waiting periods and endodontics
- **FlexAppeal Preventive MaxMultiplier:** Optional. Claims for preventive and diagnostic services are not applied to the deductible or annual maximum. Required participation is 10 or more members

Technology

- **Employer eServices®:** Employers can easily manage eligibility, receive electronic bills, make payments and access standard reporting options online
- **Employee self-service online:** Members can search for network dentists, check claim status, request an ID card, view benefit summaries, view remaining benefits and obtain educational information
- **Treatment Cost Calculator:** Consumers can compare procedure costs between in-network and out-of-network dentists¹

Funding options

- Options for employer to pay some or none of premium:
 - Non-contributory (fully paid by employer)
 - Contributory (partially paid by employer)
 - Voluntary may be offered on a fully insured or administrative services only (ASO) basis to groups of at least two

Flexible plan design

Eligibility

- Full-time employees working a minimum of 30 hours per week
- Dependent children up to age 26

Coverage categories

- Class I – Preventive and diagnostic
- Class II – Minor restorative
- Class III – Major restorative
- Class IV – Orthodontics

Enrollment capabilities

Our enrollment support team is here to help make benefits education easy and enrollment simple.

For your client

- Knowledgeable account team
- Enrollment planning with our consultants
- Online enrollment for their employees²

For their employees

- Pre-enrollment multimedia education for employees
- Educational benefits brochures
- On-site enrollment sessions for larger groups
- Benefit manager train-the-trainer sessions for large decentralized groups
- Enrollment counselors to help them decide which coverage is right for them
- Online enrollment²
- Simple, personalized enrollment forms³

Contact us today.



For more information about UnitedHealthcare dental, contact your UnitedHealthcare representative.



¹The Treatment Cost Calculator tool is not applicable for Managed Care (DHMO and Direct Compensation) plan members.

²Available in most instances; contact your account representative for details.

³Available for 10/01/2011 enrollment dates and beyond. Subject to employer size and coverage purchased.

UnitedHealthcare Dental[®] coverage underwritten by UnitedHealthcare Insurance Company, located in Hartford, Connecticut, or its affiliates.

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