

## Dental Benefits Summary for SEYMOUR INDEPENDENT SCHOOL DISTRICT

Group Number: 883378000/099

Network: Elite Plus

Benefit Category <sup>1</sup>	CONCORDIA CHOICE PLAN	
	In-Network <sup>2</sup>	Non-Network <sup>3</sup>
Class I – Diagnostic/Preventive Services		
Exams	100%	100%
Bitewing X-rays		
All Other X-rays		
Cleanings & Fluoride Treatments		
Sealants		
Palliative Treatment		
Class II – Basic Services		
Basic Restorative (Fillings)	80%	80%
Simple Extractions		
Space Maintainers		
Repairs of Crowns, Inlays, Onlays, Bridges & Dentures		
Endodontics		
Nonsurgical Periodontics		
Surgical Periodontics		
Complex Oral Surgery		
General Anesthesia		
Class III – Major Services		
Inlays, Onlays, Crowns	50%	50%
Prosthetics (Bridges, Dentures)		
Orthodontics for dependent children to age 19		
Diagnostic, Active, Retention Treatment	50%	50%
Included Plan Features		
Preventive Incentive®	Class I services do not count toward your annual program maximum	
Pregnancy Benefit	Covers 1 additional cleaning during pregnancy	
Maximums & Deductibles (applies to the combination of services received from network and non-network dentists)		
Calendar Year Deductible (per person/per family)	\$50/\$150 (Excludes Class I & Orthodontics)	
Calendar Year Maximum (per person)	\$1,000 (Excludes Class I & Orthodontics)	
Lifetime Orthodontic Maximum (per person)	\$1,000	
Waiting Periods		
Class I	None	None
Class II	None	None
Class III	6 months	6 months
Orthodontics for dependents to age 19	12 months	12 months
Reimbursement	Elite <i>Plus</i>	90 <sup>th</sup> Percentile

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

Rates eff. 10/01/2025	COST PER MONTH
Employee Only	\$32.24
Employee + 1 Adult	\$63.60
Employee + Child(ren)	\$69.60
Employee + Family	\$111.82

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](http://www.UnitedConcordia.com). Administrative and claims offices located 1800 Center Street Suite 2B 220, Camp Hill, PA 17011 (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. Unmarried dependent children covered to age 25
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. 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 90<sup>th</sup> Percentile of such data. Non-network dentists may bill the member for any difference between our allowance and their fee.

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)。