



A healthy smile in 2025 starts here

Univera Healthcare Healthy Smile DentalSM and
Univera Healthcare Healthy Smile Premier DentalSM

Making oral health more affordable with quality dental plans

Taking care of your teeth and gums is an important part of maintaining overall health and wellbeing. Regular dental visits, along with daily brushing and flossing, can greatly reduce the occurrence of major oral health issues, as well as help detect a number of other medical conditions.¹

By emphasizing no-cost preventive care, **Healthy Smile Dental** plans help you maintain complete oral health, reducing the need for more costly dental care in the future. At the same time, it helps you to minimize pain and anxiety, eat and sleep without disruption, boost self-confidence, and have an overall better quality of life.

Now that's something to smile about.



Right here.
For you.

How this works:

Both plans come with a deductible, which means that for some services, you're responsible for the costs up to that amount. Once you've met your deductible, the plan starts contributing. There is an **Annual Max** per member age 19 and older that applies to diagnostic & preventative, basic and major services. The **Annual Max** for Healthy Smile Dental is: **\$750**. The **Annual Max** for Healthy Smile Premier Dental is: **\$1,250**.

- Under both plans, diagnostic and preventive services are covered in full and not subject to the deductible. This means you'll have no out-of-pocket costs when visiting an in-network dentist for services like your adult oral exam or bi-annual cleanings.
- For all other covered services, like having a cavity filled and dentures, you're responsible for paying a percentage of the cost, called coinsurance.
- To limit your costs each year, the pediatric benefits come with an out-of-pocket maximum (OOPM) which is the maximum amount you'll have to pay during that plan year (excluding premiums).

What's covered

All of our individual and family dental plans offer comprehensive coverage that will give you the confidence you need to get care when you need it:

- Cleaning and exams
- Routine x-rays
- Fillings
- Select crowns*
- Dentures*
- Endodontics and periodontics



All plans include the mandated Pediatric Dental Essential Health Benefits in accordance with the Affordable Care Act.

Two plan options to fit your needs	Healthy Smile Dental		Healthy Smile Premier Dental	
	Pediatric benefits (Up to age 19)	Adult benefits (Age 19 and older)	Pediatric benefits (Up to age 19)	Adult benefits (Age 19 and older)
Deductible	Per Enrollee: \$50 2 or more enrollees: \$150 (Does not apply to diagnostic & preventive services)	Single: \$50 Family: \$150 (Does not apply to diagnostic & preventive services)	Per Enrollee: \$50 2 or more enrollees: \$150 (Does not apply to diagnostic & preventive services)	Single: \$50 Family: \$150 (Does not apply to diagnostic & preventive services)
Annual Maximum (per member)	None	\$750 (Applies to diagnostic & preventive, basic, and major services)	None	\$1,250 (Applies to diagnostic & preventive, basic, and major services)
Out-of-Pocket Maximum	Per enrollee: \$350 2 or more enrollees: \$700	None	Per enrollee: \$350 2 or more enrollees: \$700	None
Cost-Sharing:				
Class I: diagnostic & preventive e.g. cleanings and adult exams	0%	0%	0%	0%
Class II: basic e.g. fillings, pediatric exams, adult root canals	50%	50%	20%	20%
Class III: major e.g. select crowns, dentures	50%	50%	50%	50%
Class IV: orthodontic services e.g. medically necessary braces up to age 19	50%	Not covered	50%	Not covered
Waiting periods (off exchange plans)	None	Major services: 12 months (Does not apply to diagnostic & preventive or basic services)	None	Major services: 12 months (Does not apply to diagnostic & preventive or basic services)

Standard exclusions apply. Dependents (excluding spouse) can be covered up to age 26. Waiting periods may be waived with proof of prior coverage. Service categories vary between Adult and Pediatric coverage.

*Subject to 12-month waiting period for Major services on off exchange plans

The top 5 things to know

1 What benefits are free?

- One cleaning and preventive adult oral exam is covered every six months at no cost to you.

2 Does my plan have a deductible? If so, what does it apply to?

- Yes, these plans have a deductible. Refer to the benefits table on the previous page for the individual, pediatric and family deductibles for each plan.
- The deductible will apply to all covered services except for preventive and diagnostic services, such as oral exams and cleanings, which are covered in full and not subject to the deductible.

3 How does the money I pay toward my deductible add up (or aggregate)?

- When only covering yourself, you will pay the single deductible amount.
- When covering more than one person, the family deductible is met for everyone on the plan when one or any combination of members reaches the family deductible amount.
- Once you meet your deductible, the plan begins paying on your claims and you're only responsible for a percentage of costs, called coinsurance.

4 Is there a waiting period?

- There is no waiting period for pediatric benefits (up to age 19).
- For adult benefits (age 19 and older), there are no waiting periods on diagnostic, preventive, or basic services. Major services are subject to a 12-month waiting period on off exchange plans. Waiting period may be waived with proof of prior dental coverage at enrollment.

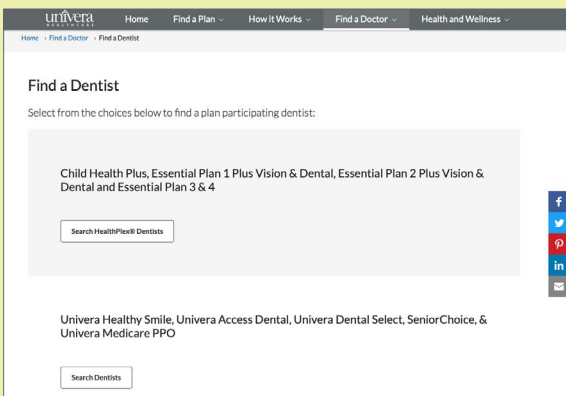
5 What dentists accept this plan?

- You can see if your dentist is in network or find a new dentist by using our **Find a Dentist** tool at **UniveraHealthcare.com/FindADentist**

Find a dentist tool

It's important to find a dentist you feel comfortable with, and one with convenient locations and appointment times. Use our [Find a Dentist](#) tool to find one near you.

UniveraHealthcare.com/FindADentist



The screenshot shows the Univera website's 'Find a Dentist' tool. At the top, there is a navigation bar with links for Home, Find a Plan, How it Works, Find a Doctor, and Health and Wellness. Below the navigation bar, the page title is 'Find a Dentist'. A sub-header reads 'Select from the choices below to find a plan participating dentist:'. There are two main sections. The first section lists 'Child Health Plus, Essential Plan 1 Plus Vision & Dental, Essential Plan 2 Plus Vision & Dental and Essential Plan 3 & 4' with a 'Search HealthPlex® Dentists' button. The second section lists 'Univera Healthy Smile, Univera Access Dental, Univera Dental Select, SeniorChoice, & Univera Medicare PPO' with a 'Search Dentists' button. On the right side of the page, there are social media icons for Facebook, Twitter, Pinterest, LinkedIn, and Email.





Why it's important to practice good oral health

More than 1 in 4 (26%) adults in the United States have untreated tooth decay.²

Nearly half (46%) of all adults aged 30 years or older show signs of gum disease; severe gum disease affects about 9% of adults.³

Up to 120 medical conditions can be detected early through examination of the mouth, throat and neck.¹

Diabetes, heart disease, stroke and other serious medical conditions can be caught early based on warning signs such as gum disease and infections.⁴

You can manage your dental benefits online at Member.UniveraHealthcare.com

View and order member cards, find a dentist, access your benefits and claims information, pay your premium bill, and more.



Enroll today!

Visit TheUniveraDifference.com or call 1-844-829-8513 (TTY 711)

1 Little, James W., Falace, Donald A., Miller, Craig S., & Rhodus, Nelson L., "Dental Management of the Medically Compromised Patient (8th ed.)," 2012.

2 Centers for Disease Control and Prevention. "Oral Health Surveillance Report: Trends in Dental Caries and Sealants, Tooth Retention, and Edentulism, United States, 1999–2004 to 2011–2016." Atlanta, GA: Centers for Disease Control and Prevention, US Dept of Health and Human Services; 2019.

3 Eke P, Thornton-Evans G, Wei L, Borgnakke W, Dye B, Genco R. Periodontitis in US adults: National Health and Nutrition Examination Survey 2009-2014. JADA. 2018;149(7):576-586.

4 CDC, "Oral Health: Preventing Cavities, Gum Disease, and Tooth Loss," 2009.

Important terms to know

Deductible - The amount of money you have to pay before the health insurance company will make any payments towards dental services. The deductible amount will vary based upon your plan, so make sure you know what that amount is.

Coinsurance - Your share of the costs of a covered dental service, calculated as a percent. Coinsurance is similar to a copay, but instead of a fixed dollar amount, it is a percentage of the total bill. **For example**, if your filling costs \$100 and you've met your deductible, your coinsurance payment of 20% would be \$20. The health insurance company would pay the rest, or \$80.

Out-of-pocket maximum - An annual limit on the amount of money that you would have to pay for dental services, not including your monthly premium. This is also called the out-of-pocket maximum (OOPM).

Schedule of Allowances/Fee Schedule - The maximum amount the insurance company will pay for specific dental procedures or services. To obtain information on the current fee schedule, please call the Customer Care number on the back of your card, or 1-844-829-8513.

Participating Dentist (in-network) - These dentists agree to accept the fee schedule as payment in full for services performed and will not bill you for an additional amount.

Non-Participating Dentists (out-of-network) - These dentists are not part of the dental network. When you receive care from a non-participating dentist it will cost you more out-of-pocket.

You can reduce your out-of-pocket costs by seeing a participating dentist. Find a participating dentist by visiting our website at UniveraHealthcare.com/FindADentist or call Customer Care at 1-844-829-8513.