



Dental Benefits Summary for Allegheny College

Effective Date: July 1, 2011

Network: Concordia Advantage

Benefit Category ¹	CONCORDIA FLEX		
	In-Network ²	Non-Network ²	Deductible
Class I – Diagnostic/Preventive Services (Excluded from Annual Program Maximum)			
Exams	100%	100%	None
Bitewing X-rays			
Cleanings & Fluoride Treatments (includes 1 additional cleaning during pregnancy)			
Class II – Basic Services			
All Other X-rays	80%	80%	\$50
Sealants			
Basic Restorative (Fillings)			
Simple Extractions			
Space Maintainers			
Palliative Treatment			
Class III – Major Services			
Repairs of Crowns, Inlays, Onlays, Bridges & Dentures	50%	50%	\$50
Inlays, Onlays, Crowns			
Prosthetics (Bridges, Dentures)			
Endodontics			
Complex Oral Surgery			
General Anesthesia			
Nonsurgical Periodontics			
Surgical Periodontics			
Orthodontics for dependent children to age 19			
Diagnostic, Active, Retention Treatment	Not Covered	Not Covered	Not Applicable
Maximums & Deductibles (cumulative of network and non-network)			
Annual Program Maximum (per person)	\$1,000 Excludes Class I	\$1,000 Excludes Class I	
Annual Program Deductible (per person/per family)	\$50/\$150 Excludes Class I	\$50/\$150 Excludes Class I	
Lifetime Orthodontic Maximum (per person)	Not Applicable	Not Applicable	

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

1. Unmarried dependent children covered to age 19. Unmarried dependent students covered to age 25 or until the first of the month following graduation, whichever occurs first.

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.

1-800-332-0366 www.unitedconcordia.com