Dental



Dental coverage on UnitedHealthcare
Medicare Advantage plans **provides additional benefits for services not covered by Original Medicare** that can help protect your teeth and gums and make a difference to your overall health.

All UnitedHealthcare plans with dental include:
\$0 deductible
\$0 copay on most covered services

What's new for 2025?



Improved experience

Reduced reviews for specific dental services, including crowns, x-rays, fluoride and extractions.



Preventive only options

Coverage for preventive only dental care will be more common in 2025 with the option to add a dental rider for comprehensive care.

Why UnitedHealthcare?

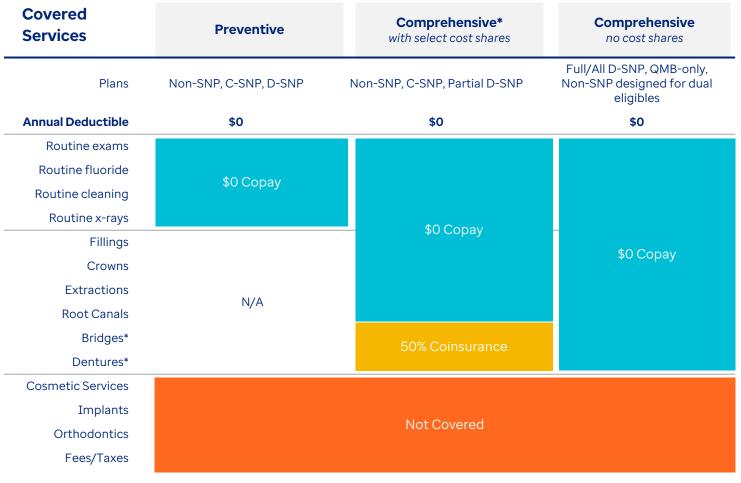
UnitedHealthcare Dental provides additional benefits for services not covered by Original Medicare.

- \$0 deductible with no waiting periods.
- \$0 copay for covered preventive services and most comprehensive services.
- · No referrals needed.
- Most plans have access to a nationwide dental network of 100,000+ providers*.
- Freedom to see any in-network or out-of-network dentist on HMO-POS and PPO plans.



How does it work?

There are two plan types: Preventive and Comprehensive. The UnitedHealthcare UCard® features "with dental" making it easier for members and providers to confirm the plan offers dental benefits.



*Coinsurance applies to new dentures and bridges, not modifications and adjustments. Frequency limits and clinical criteria apply.

D-SNPs in AZ, NY and PA are supported by large local networks.

Select plans, noted in the Medicare Product Portal, offer a Platinum Dental Rider. Members can add the dental rider at the time of enrollment or within 3 months of their plan effective date. Members can disenroll from the dental rider at any time. There is no deductible for dental rider plans. The premium will vary based on the plan's embedded dental benefit, but the coverage is the same and is up to \$1,500 toward covered services with cost shares (*the same as the "Comprehensive with select cost shares" benefit above). There are three dental rider plan designs:

- 1. No embedded dental coverage (\$59 p/mo.)
- 2. Embedded Preventive (\$54 p/mo.)
- 3. Embedded \$500 Comprehensive (\$46 p/mo.)



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How does it work?

- Most members have the freedom to see any in- or out-of-network (OON) dentist.
- Network dentists (INN) have agreed to provider services at a negotiated rate. If a member sees a network dentist, they cannot be billed more than that rate for covered services within the limitations of the plan. Below is an example of how that might work.
- Seeing an out-of-network dentist may cost more, even for services listed as \$0 copay.
 - o Out-of-network dentists often submit claims directly to the plan on behalf of the member. If they do not, members can submit directly using the instructions outlined in the EOC.
 - o The plan pays based on out-of-network fee schedules, which may be different than what the dentist bills.
 - o Out-of-network dentists are not contracted to accept what the plan pays as payment in full. This means they might bill members for the remaining balance even if the plan doesn't require then member to pay a copay. Here's an example of how that might work:

	OON	INN
Amount dentist charges for service	\$100	\$100
Amount Plan requires member to pay	\$0	\$0
Amount UnitedHealthcare pays to provider for services	\$80	\$80
Amount member may be balance billed for	\$20	\$0

How can you support your members?

- Help members know what to expect for 2025 and how out-of-network and in-network benefits work.
- Let members know about the improved experience due to removing reviews for common services.
- Help members find a provider by visiting Jarvis > Quick Access > Find a Dentist.
- Help members log in to their UnitedHealthcare member website or UnitedHealthcare mobile app where they can view coverage, find a dental provider (use the Dental Provider search) or get help scheduling appointments.

