



What is it?

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

You asked for a simpler benefit design to make it easier to sell dental. For 2023, we are collapsing five dental levels into two: preventive-only and a single level of comprehensive coverage.

2022 Dental Benefit Design Varied Levels of Coverage



annual max

dental services

We know members want and need more when it comes to dental benefits. That's why we've expanded our comprehensive coverage to include many commonly needed preventive and comprehensive services including dentures and implants. Members also have access to Medicare Advantage's largest national dental network in addition to out-of-network access on many plans.

Key Differentiators

- Members can choose from a robust dental network. Most plans are supported by the UnitedHealthcare Dental National Medicare Advantage Network, which is the largest national Medicare Advantage dental network with 100,000+ providers nationwide.
- 2023 plans offer our **best and** most flexible care options ever.
- All members will have no annual deductible and nearly all members will have **no cost sharing** when using a network dentist up to their annual maximum.

New in 2023

- Simplified and enhanced dental benefit structure.
- Increased allowances on many plans.
- Nearly all eligibles will have access to a plan with enhanced dental coverage. If the enhanced dental coverage is not offered, plans often include the embedded Preventive Dental and/or a Platinum Dental Rider, which offers the same comprehensive coverage as the new enhanced dental benefit.
- Out-of-network access on many plans.

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What's covered by the enhanced comprehensive benefit?

Preventative Care

- Exams
- Cleanings
 - o Prophylaxis
 - Periodontal Maintenance
 - Deep Cleanings
- Fluoride
- X-Rays

Enhanced Dental Coverage

- Fillings (including tooth color)
- Crowns (including tooth color)
- Root Canals
- Extractions
- Bridges
- Partial Dentures
- Complete Dentures
- Implants
- ...and more

What's Not Included?

- Cosmetic services (whitening, bleaching, veneers)
- Orthodontics
- Sales tax
- Missed appointment fees

What can members expect?

- \$0 copay for covered dental with annual maximums starting at \$500 for cleanings, fluoride, fillings, crowns, root canals, extractions, dentures, implants and more when using network providers.
- For help with benefit coverage, locating a dental provider, or for assistance in scheduling a dental appointment, members can call the member service number on their UCard member ID or login to the UnitedHealthcare member website.
- Select plans (approx. 18) with the enhanced comprehensive dental benefit will have cost sharing on comprehensive services. These plans have:
 - o \$0 copay on preventive, diagnostic, and fillings.
 - \circ 50% coinsurance applies on all other comprehensive services.
 - Check plan documents for details.

Dental and UCard™

The UnitedHealthcare UCard[™] makes using the benefit simple. 2023 plans offering dental coverage will have "with dental" after the plan name on the front of the UCard, making it easier for members and providers to confirm the plan offers the benefit. If the card says "with dental," network dentists take that plan!



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UnitedHealthcare Dental National Medicare Advantage Network

- UnitedHealthcare offers access to the largest Medicare Advantage dental network, with more than 100,000 providers nationwide.
- Seeing a network provider can result in substantial savings and help members maximize their dental benefit.
- Network dentists have agreed to provide services at a negotiated rate. If a member sees a network dentist, they cannot be billed more than the rate for covered services within the limitations of the plan.
- Members can find a network dentist by logging into the UnitedHealthcare portal and using the Dental Provider search tool or call the member service number on their Ucard.



How does out-of-network coverage work?

- With UnitedHealthcare Dental coverage, members have the freedom to see any dentist who accepts Medicare, in or out of the network.
- Seeing an out-of-network dentist may cost more, even for services listed as \$0 copay.
- Out-of-network dentists will 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.
- The plan pays based on out-of-network fee schedules, which may be different than what the dentist bills.
- Out-of-network (OON) 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 the member to pay a copay. Here's an example of how that might work:

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

 Contracted rates can often be much lower than billed charges which means that seeing a UnitedHealthcare network dentist can help the coverage go further.

