

Top Selling Voluntary Plans

INDEMNITY PLANS											
DEDUCTIBLE SINGLE / FAMILY	COINSURANCE				ANNUAL MAX	LIFETIME MAX ORTHO BENEFIT	PLAN NAME				
	PREVENTIVE	BASIC	MAJOR	ORTHODONTIA							
\$50 / \$150	100%	80%	50%	N/A	\$1,000	N/A	I0675				
\$50 / \$150	80%	60%	50%	N/A	\$750	N/A	I0677				

PPO PLANS											
DEDUCTIBLE SINGLE / FAMILY	NETWORK COINSURANCE				NON-NETWORK COINSURANCE				ANNUAL MAX	LIFETIME MAX ORTHO BENEFIT	PLAN NAME
	PREVENTIVE	BASIC	MAJOR	ORTHODONTIA	PREVENTIVE	BASIC	MAJOR	ORTHODONTIA			
\$50 / \$150	100%	80%	50%	N/A	100%	80%	50%	N/A	\$1,000	N/A	P1211
\$50 / \$150	80%	60%	50%	N/A	80%	60%	50%	N/A	\$750	N/A	P1214
\$50 / \$150	100%	80%	50%	50%	80%	60%	50%	0%	\$1,000	\$1,000	P1215
\$50 / \$150	100%	50%	50%	50%	N/A	N/A	N/A	50%	\$1,500	\$1,000	PIN06†
\$50 / \$150	100%	50%	50%	N/A	N/A	N/A	N/A	N/A	\$1,500	N/A	PIN60

Top Selling Employer Sponsored Plans

PPO PLANS											
DEDUCTIBLE SINGLE / FAMILY	NETWORK COINSURANCE				NON-NETWORK COINSURANCE				ANNUAL MAX	LIFETIME MAX ORTHO BENEFIT	PLAN NAME
	PREVENTIVE	BASIC	MAJOR	ORTHODONTIA	PREVENTIVE	BASIC	MAJOR	ORTHODONTIA			
\$50 / \$150	100%	80%	50%	N/A	100%	80%	50%	N/A	\$1,000	N/A	P0015
\$50 / \$150	80%	60%	50%	N/A	60%	50%	50%	N/A	\$1,000	N/A	P0036
\$50 / \$150	100%	80%	50%	N/A	80%	60%	50%	N/A	\$1,500 \$1,000 OON	N/A	P0042
\$50 / \$150	100%	80%	50%	N/A	100%	80%	50%	N/A	\$2,000	N/A	P2398
\$50 / \$150	100%	80%	50%	N/A	100%	60%	50%	N/A	\$1,000	N/A	P3434#
\$50 / \$150	100%	80%	50%	N/A	100%	80%	50%	N/A	\$1,000	N/A	P3436#
\$50 / \$150	100%	80%	50%	N/A	100%	80%	50%	N/A	\$1,000	N/A	P2543
\$50 / \$150	100%	80%	50%	50%	100%	80%	50%	50%	\$1,000	\$1,000	P3416#
\$25 / \$75	100%	90%	60%	N/A	100%	80%	50%	N/A	\$1,000	N/A	P2372
\$50 / \$150	100%	80%	50%	N/A	90%	70%	50%	N/A	\$1,000	N/A	P2374
\$50 / \$150	100%	50%	50%	50%	N/A	N/A	N/A	50%	\$1,000	\$1,000	PIN05†
\$50 / \$150	100%	50%	50%	N/A	N/A	N/A	N/A	N/A	N/A	N/A	PIN50†

Shaded plans have no waiting periods regardless of previous coverage

Don't see what you're looking for? Ask your UnitedHealthcare Sales Representative — we have MANY plan options!

UnitedHealthcare Dental

97% member satisfaction with overall quality of dental care*
More than 99% financial accuracy of dental claims payments**
Dual Option now available

All Plans

- Available Stand-Alone
- Freedom to See Any Dentist
- Multi-Site Capabilities
- Deductible Waived for Preventive Services
- Waiting Period Waived & Deductible Credit for Take-Over Groups
- Streamlined, Online Administration through Employer eServices®
- Orthodontia Available to Groups of 10+ Eligibles and 8 Enrollees

Voluntary Plans

- Only 2 Enrollees Required
- Periodontics/Endodontics/Oral Surgery Covered as Major
- No Participation Percentages Required
- Non-network Claims Reimbursed at MAC, Indemnity at 85%

Employer Sponsored Plans

- 50% Employer Contribution Required for Employee Premium
- 75% Participation of all Eligible Employees, not less than 50% after waivers
- Periodontics/Endodontics/Oral Surgery Covered as Basic Services with the exception of P2374 and P2543 which pays these services in Major
- 85th Percentile UCR Reimbursement Non-Network
- PIN05 and PIN50 covers both adult and child ortho

* 2006 UnitedHealthcare Dental Member Satisfaction Survey

** 2006 UnitedHealthcare Dental Service Metrics

Consumer MaxMultiplierSM Plan

† In-Network Only plans are not available in all areas. Benefits are for in-network only except for ortho and emergency coverage which is both in and out of network.



Dual Option available for groups with 10 or more enrollees. Choose any two plans that differ by more than Orthodontia coverage.

These benefit grids are intended only to highlight plan benefits and should not be relied upon to fully determine coverage. These plans may not cover all dental care expenses. This policy has exclusions, limitations and terms under which the policy may be continued in force or discontinued. For costs and complete details of the coverage, contact your broker or UnitedHealthcare.