

Dental Plans  
Dental PPO

**A dental plan**  
that gives  
you plenty to  
smile about.



[welcometouhc.com/dentalppo20](https://www.welcometouhc.com/dentalppo20)

Toll-Free **1-888-679-8925**

Habla Español? Podemos ayudar.

# We're focused on helping you save money and keeping your teeth and gums healthy.



## Giving you freedom and choice.

You can see any dentist you want, anywhere across the country. When you choose a dentist who is part of the plan's large national network, you may receive discounted rates only available to members.

**See any dentist and save by using our network.**

**There's no need to get referrals to see a specialist.**

**Preventive care is covered 100% in our network.**

**Get coverage on hundreds of services.**

Visit [welcometouhc.com/dentalppo20](http://welcometouhc.com/dentalppo20) to find network providers and learn more.



## Helping you stay healthier.

### Oral cancer screenings.

With our dental plan, adults (age 18 and older) get oral cancer screenings as part of your preventive care benefit.

**There are over 49,000 new cases of oral cancer detected<sup>1</sup> and a little over 60% survive more than five years.<sup>2</sup>**

### Extra care during pregnancy.

We cover extra dental visits during pregnancy and the first three months after birth.<sup>3</sup>

### Pregnant women are at higher risk of dental disease.<sup>4</sup>

During pregnancy, a woman is more likely to have gum disease. And gum disease is associated with pregnancy complications. Once a woman gives birth, she can pass oral bacteria on to her baby through kisses and sharing spoons. That's why it's so important to treat and detect oral diseases during pregnancy. And it's good to know that seeing a dentist when you're pregnant is safe.



## How your teeth affect your health.

Gum disease is a painless disease that causes bacteria and toxins to enter your blood, which may also be connected to:<sup>5</sup>

- ✓ Diabetes
- ✓ Heart disease
- ✓ Respiratory conditions
- ✓ Pregnancy complications
- ✓ Rheumatoid arthritis



## Paying for dental care.

Please review your dental plan documents to view the plan's specific coverage and cost details.

### 1 Deductible.

The deductible is the amount you need to pay before your plan will start to pay for covered services. You'll pay for all dental services until you meet your deductible.

This does not apply to preventive care services received in the network.

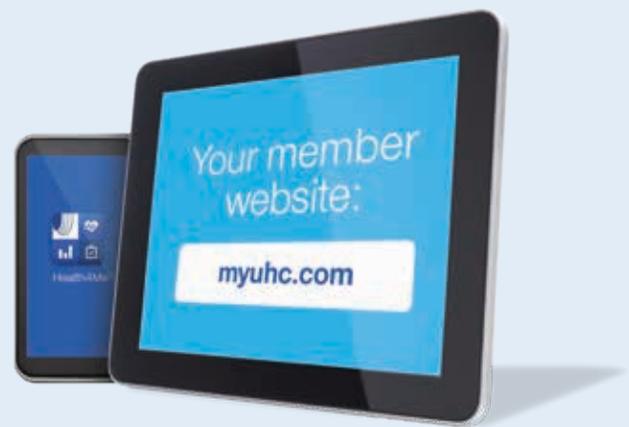
### 2 Coinsurance.

After you reach the deductible, you will share the cost of covered services with the plan. You will only pay a percentage of the cost.

This does not apply to preventive care services received in the network.

### 3 Annual maximum.

This is the most the dental plan will pay for covered services in the plan year. Once the plan pays this amount, the plan will no longer help pay for services.



Tap into your benefits on [myuhc.com](http://myuhc.com)<sup>®</sup> and the UnitedHealthcare Health4Me<sup>®</sup> app.

---

**SEARCH**  
for a network dentist  
or dental clinic.

---

**ACCESS**  
and share your digital  
dental plan ID card.

---

**ESTIMATE**  
dental costs.

---

**VIEW**  
claims and more.

Learn more.



Call 1-888-679-8925  
Habla Español? Podemos ayudar.



Visit [welcometouhc.com/dentalppo20](http://welcometouhc.com/dentalppo20)

We do not treat members differently because of sex, age, race, color, disability or national origin. If you think you were treated unfairly because of your sex, age, race, color, disability or national origin, you can send a complaint to the Civil Rights Coordinator.

Online: [UHC\\_Civil\\_Rights@uhc.com](mailto:UHC_Civil_Rights@uhc.com)

**Mail:** Civil Rights Coordinator, UnitedHealthcare Civil Rights Grievance, P.O. Box 30608, Salt Lake City, UT 84130

You must send the complaint within 60 days of when you found out about it. A decision will be sent to you within 30 days. If you disagree with the decision, you have 15 days to ask us to look at it again.

If you need help with your complaint, please call the toll-free phone number listed on your ID card, TTY 711, Monday through Friday, 8 a.m. to 8 p.m.

You can also file a complaint with the U.S. Dept. of Health and Human Services.

**Online:** <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>

Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>.

**Phone:** Toll-free 1-800-368-1019, 1-800-537-7697 (TDD)

**Mail:** U.S. Dept. of Health and Human Services, 200 Independence Avenue, SW Room 509F, HHH Building, Washington, D.C. 20201

We provide free services to help you communicate with us, such as letters in other languages or large print. Or, you can ask for an interpreter. To ask for help, please call the toll-free phone number listed on your ID card, TTY 711, Monday through Friday, 8 a.m. to 8 p.m.

ATTENTION: If you speak English, language assistance services, free of charge, are available to you. Please call the toll-free phone number listed on your identification card.

ATENCIÓN: Si habla español (Spanish), hay servicios de asistencia de idiomas, sin cargo, a su disposición. Llame al número de teléfono gratuito que aparece en su tarjeta de identificación.

請注意：如果您說中文 (Chinese)，我們免費為您提供語言協助服務。請撥打會員卡所列的免付費會員電話號碼。

XIN LƯU Ý: Nếu quý vị nói tiếng Việt (Vietnamese), quý vị sẽ được cung cấp dịch vụ trợ giúp về ngôn ngữ miễn phí. Vui lòng gọi số điện thoại miễn phí ở mặt sau thẻ hội viên của quý vị.

알림: 한국어 (Korean)를 사용하시는 경우 언어 지원 서비스를 무료로 이용하실 수 있습니다. 귀하의 신분증 카드에 기재된 무료 회원 전화번호로 문의하십시오.

PAALALA: Kung nagsasalita ka ng Tagalog (Tagalog), may makukuha kang mga libreng serbisyo ng tulong sa wika. Pakitawagan ang toll-free na numero ng telepono na nasa iyong identification card.

ВНИМАНИЕ: бесплатные услуги перевода доступны для людей, чей родной язык является русским (Russian). Позвоните по бесплатному номеру телефона, указанному на вашей идентификационной карте.

لعب قصصنا فني وعملنا فني اجملنا فتعالنا مقرب لاصتالنا اى جري اول احامه فينا اجملنا فيو غللا قدع اسجلنا تاداخ ناف (Arabic) فيجرعنا شحتت تنك اذا بهينب.

ATANSYON: Si w pale Kreyòl ayisyen (Haitian Creole), ou kapab benefisye sèvis ki gratis pou ede w nan lang pa w. Tanpri rele nimewo gratis ki sou kat idantifikasyon w.

ATTENTION: Si vous parlez français (French), des services d'aide linguistique vous sont proposés gratuitement. Veuillez appeler le numéro de téléphone gratuit figurant sur votre carte d'identification.

UWAGA: Jeżeli mówisz po polsku (Polish), udostępniliśmy darmowe usługi tłumacza. Prosimy zadzwonić pod bezpłatny numer telefonu podany na karcie identyfikacyjnej.

ATENÇÃO: Se você fala português (Portuguese), contate o serviço de assistência de idiomas gratuito. Ligue gratuitamente para o número encontrado no seu cartão de identificação.

ATTENZIONE: in caso la lingua parlata sia l'italiano (Italian), sono disponibili servizi di assistenza linguistica gratuiti. Per favore chiamate il numero di telefono verde indicato sulla vostra tessera identificativa.

ACHTUNG: Falls Sie Deutsch (German) sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Bitte rufen Sie die gebührenfreie Rufnummer auf der Rückseite Ihres Mitgliedsausweises an.

注意事項：日本語 (Japanese) を話される場合、無料の言語支援サービスをご利用いただけます。健康保険証に記載されているフリーダイヤルにお電話ください。

چوت: يدري گب سامت هدش دعتق امش يي يسانش تراك مور مك ين اگيار نفلت رامش اب افصل. يشاب يم امش رايت خا رد ناگيار روط به ين ابنر دادما تاداخ، تسمنا (Farsi) سيراف امش نابز رگا بهوت.

ध्यान दें: यदि आप हिंदी (Hindi) बोलते हैं, आपको भाषा सहायता सेवाएं, नःशुल्क उपलब्ध हैं। कृपया अपने पहचान पत्र पर सूचीबद्ध टोल-फ्री फोन नंबर पर कॉल करें।

CEEBOOM: Yog koj hais Lus Hmoob (Hmong), muaj kev pab txhais lus pub dawb rau koj. Thov hu rau tus xov tooj hu deb dawb uas teev muaj nyob rau ntawm koj daim yuaj cim qhia tus kheej.

ចំណាប់អារម្មណ៍: ប្រសិនបើអ្នកនិយាយភាសាខ្មែរ (Khmer) សំដៅជំនួយ ភាសាដើមយកតម្កល់ គឺមានសំរាប់អ្នក។ សូមទូរស័ព្ទទៅលេខតម្កល់ ដល់មាននៅលើអត្តសញ្ញាណប័ណ្ណរបស់អ្នក។

PAKDAAR: Nu saritaem ti Ilocano (Ilocano), ti serbisyo para ti baddang ti lengguahe nga awanan bayadna, ket sidadaan para kenyam. Maidawat nga awagan iti toll-free a numero ti telepono nga nakalista ayan iti identification card mo.

DÍÍ BAA'ÁKONÍNÍZIN: Diné (Navajo) bizaad bee yáníití'go, saad bee áka'anída'awo'ígíí, t'áá jíik'eh, bee ná'ahóót'i'. T'áá shòqdí ninaaltsoos nit'i'izi bee nééhozinígíí bine'déqé' t'áá jíik'ehgo béesh bee hane'í biká'ígíí bee hodiilnih.

OGOW: Haddii aad ku hadasho Soomaali (Somali), adeegyada taageerada luqadda, oo bilaash ah, ayaad heli kartaa. Fadlan wac lambarka telefonka khadka bilaashka ee ku yaalla kaarkaaga aqoonsiga.

<sup>1</sup> American Cancer Society. Oral cavity and pharynx. 2017 American Cancer Society, Inc. Web.

<sup>2</sup> American Cancer Society. Oral cavity and pharynx. Surveillance, Epidemiology, and End Results (SEER) 18 registries, National Cancer Institute, 2016.

<sup>3</sup> This service is not available in all states.

<sup>4</sup> Pregnancy, American Dental Association. Center for Scientific Information, ADA Science Institute. 10 July 2017, Web.

<sup>5</sup> American Dental Association. Mouth Healthy Gum Disease. © 2017 American Dental Association, Web.

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 employer, broker or the company.

UnitedHealthcare dental coverage underwritten by UnitedHealthcare Insurance Company, located in Hartford, Connecticut, UnitedHealthcare Insurance Company of New York, located in Islandia, New York, or their affiliates. Administrative services provided by Dental Benefit Providers, Inc., Dental Benefit Administrative Services (CA only), DBP Services (NY only), United HealthCare Services, Inc. or their affiliates. Plans sold in Texas use policy form number DPOL.06.TX, DPOL.12.TX and DPOL.12.TX (Rev. 9/16) and associated COC form numbers DCOC.CER.06, DCOC.CER.IND.12.TX and DCERT.IND.12.TX. Plans sold in Virginia use policy form number DPOL.06.VA with associated COC form number DCOC.CER.06.VA and policy form number DPOL.12.VA with associated COC form number DCOC.CER.12.VA.

