Dental insurance

Product suite overview

Features and benefits.

UnitedHealthcare®
UnitedHealthcare's broad product portfolio makes it easy to find a plan that’s right for any group — big or small. Here's an overview of our product offering. Your UnitedHealthcare representative is always happy to help you find the right dental plan for your customers. We appreciate your partnership. To compare the features and benefits of each plan, see the chart that follows.

*In MD, VA and Washington DC, these plans are only available to groups of 100 or more.
Dental product overview.

PPO (Preferred Provider Organization)

**Product description:**
- **Large national network:** more than 185,000 locations
- **Network discounts:** Significant savings — 35% on average
- **In- and out-of-network coverage:** Standard out-of-network reimbursement options include maximum allowable charge or 70%, 80%, 85%, 90% and 95% of usual and customary rate
- **Plan option flexibility** increases for groups of 10 or more
- **Passive and active** plan options available in most states
- **Automated claims processing:** No claims paperwork for in-network services
- **No referrals required**
- **Comprehensive and limited benefit plans available,** including preventive and diagnostic and preventive, diagnostic and basic
- **Wellness features included in all plans:** Light contrast screening and brush biopsy to detect oral cancer in adults and enhanced prenatal benefit (see details that follow)
- **Optional features:** Consumer MaxMultiplier® Rollover Benefit, FlexAppeal Preventive MaxMultiplier and FlexAppeal Enhanced (see details that follow)

**Cost ranking:**
least ★★★★★ most

**Member flexibility ranking:**
least ★★★★★ most

**Ideal for employers who:**
- Want to offer their employees our most popular plan type, featuring network savings and maximum flexibility

**Available for:**
- Fully insured groups of two or more
- Self-funded options available for large groups only
- Certain optional features available for groups of 10 or more only (see details that follow)
- Available on a voluntary or contributory basis
### Gateway PPO (Preferred Provider Organization)

**Product description:**
- **PPO features in a cost-saving design:**
  - More than 185,000 locations
  - Select endodontic/periodontic services shift from Class II to Class III
  - Full-mouth and panoramic X-rays shift from Class I to Class II
- **Priced 15% below PPO**
- **Optional features not available**

**Cost ranking:**
- least ★★★★★
- most ★★★★★

**Member flexibility ranking:**
- least ★★★★★
- most ★★★★★

**Ideal for employers who:**
- Want to offer comprehensive benefits and broad access while reducing costs

**Available for:**
- Fully insured groups of two or more
- Self-funded options available for large groups only
- Available on a voluntary or contributory basis

### INO (In-network only)

**Product description:**
- **Large national network:** more than 185,000 locations
- **Network discounts:** Significant savings of 35% on average for in-network services
- **In-network coverage only**
- **Plan option flexibility** increases for groups of 10 or more
- **Automated claims processing:**
  - No claims paperwork
- **No referrals required**
- **Wellness features included in all plans:**
  - Light contrast screening and brush biopsy to detect oral cancer in adults and enhanced prenatal benefit (see details that follow)
- **Optional features:** Consumer MaxMultiplier, FlexAppeal Preventive MaxMultiplier, and FlexAppeal Enhanced (see details that follow)

**Cost ranking:**
- least ★★★★★
- most ★★★★★

**Member flexibility ranking:**
- least ★★★★★
- most ★★★★★

**Ideal for employers who:**
- Want to offer a cost-saving managed-care plan with broad open-access network and flexible plan designs
- Available in more than 20 states (see map)

**Available for:**
- Fully insured groups of two or more
- Self-funded options available for large groups only
- Certain optional features available for groups of 10 or more only (see details that follow)
- Available on a voluntary or contributory basis
Managed Care (Dental Health Maintenance Organization and Direct Compensation)

**Product description:**
- **Regional network:** Network varies by location
- **Substantial savings:** Priced approximately 50% less than PPO plan
- **In-network coverage only**
- **No claims paperwork**
- **Primary care model:** Primary care dentist coordinates all care. Each member chooses a primary care dentist
- **Referrals may be required** for specialty care
- **Simple plan design:** Predictable, low-cost copays. No deductibles; no annual maximums

**Cost ranking:**
- *least ★★★★★ most*

**Member flexibility ranking:**
- *least ★★★★ most*

**Ideal for employers who:**
- Are located in select geographic areas where the product is available: California, Florida, Mid-Atlantic, Philadelphia, Nevada and New York
- Are looking for maximum savings through a more focused network and coordinated care practice
- Are looking for a plan that’s simple for members to use, with defined copays for all services. No deductibles. No annual maximums

**Available for:**
- Fully insured groups of two or more
- Available on a voluntary or contributory basis

Indemnity (No network)

**Product description:**
- **No network restrictions:** Choose any dentist
- **Timely reimbursement:** Member pays for care at time of service and submits claims for reimbursement
- **Payment based on fee schedule:** Providers paid based on fee schedule of 85% of usual and customary rate; members pay difference if fee is higher than set amount
- **Included at no additional charge for fully insured customers:** Adult oral cancer screening and enhanced prenatal benefit (see details that follow)
- **Optional features:** Consumer MaxMultiplier, FlexAppeal Preventive MaxMultiplier, FlexAppeal Enhanced (see details that follow)

**Cost ranking:**
- *least ★★★★★ most*

**Member flexibility ranking:**
- *least ★★★★ most*

**Ideal for employers who:**
- Have employees located in areas where network is not adequate to offer equal benefits to all employees

**Available for:**
- Fully insured and self-funded groups of two or more
- Available on a voluntary or contributory basis
Additional features and options.

- **Dual offerings** are available to groups with at least 10 or more enrolled members
  - Plan differential should have at least 20% variance
  - Plans must differ significantly in benefit richness
  - Each plan should target a minimum participation level of 20% or more subscribers

**Orthodontia**

- Plans with orthodontia coverage require 10 or more employees with a minimum of eight enrolled members

**PPO, Indemnity and INO plans automatically include these wellness features:**

- **Oral cancer benefit**: Provides routine screenings for adults. Special light enables dentists to detect lesions that could indicate oral cancer. Benefit plans include brush biopsy, if needed
- **Prenatal dental care program**: Additional preventive and periodontal services are provided to women during their entire pregnancy and for the first three months following delivery

**PPO, Indemnity and INO plans may be enhanced with the following optional features at an additional charge:**

- **Consumer MaxMultiplier Rollover Benefit**: Members who have at least one dental visit during a plan year and do not exceed a set threshold are rewarded with dollars that roll over to the next plan year. These dollars are to be used for future dental expenses. PPO plan members who receive all of their care from network providers will receive an additional award. Awards are carried over to the next plan year and never expire. Should claims exceed the benefit-year maximum, Consumer MaxMultiplier rollover funds are automatically applied to the charge. **Required participation for the Consumer MaxMultiplier Rollover Benefit** is two or more members when there are waiting periods and endodontics; periodontics and oral surgery are Class III (Major). These stipulations are not required for groups with 10 or more members
• **FlexAppeal Preventive MaxMultiplier:** This feature is designed to promote oral health. With this benefit, preventive and diagnostic services are not applied to the deductible or annual maximum. The result is that restorative services are covered, while ensuring that the annual preventive care benefits will always be available. **Required participation for FlexAppeal** is 10 or more members.

• **FlexAppeal Enhanced:** This benefit provides coverage for white fillings on back teeth, dental implants and expanded coverage for adults that includes any combination of four preventive visits and periodontal maintenance treatments during a 12-month period. **Required participation for FlexAppeal Enhanced** is 10 or more members.

Available plan options subject to state regulation.