

Understanding Your Dental Benefits

Your employer selected a plan that includes enhanced benefits for prevention and/or treatment of gum disease — an oral health condition that can have an effect on the overall health of your body.

Smile for Health[®] Maternity Benefit

Provides coverage for an additional cleaning and periodontal services for women during their pregnancy. Extra oral care during pregnancy helps prevent pregnancy gingivitis — a mild form of gum disease resulting from changes in the body’s hormone levels.

Smile for Health[®] Enhanced Dental Benefit

This benefit provides an additional diagnostic, preventive and periodontal service and increases the amount your plan will pay for these services.

Plan highlights include:

Coverage Level by Class/General Description*	ADA Code	Procedure Description	Smile for Health [®] Benefit Details	Linked Medical/Dental Condition(s)
Class I	D1110	Routine prophylaxis adult	1 additional cleaning during pregnancy	Preterm Births
Increased nonsurgical periodontics payment percentage	D0415	Collection of microorganisms for culture and sensitivity	1 per lifetime	Diabetes Preterm Births Heart Disease
	D0425	Caries susceptibility tests	1 per lifetime	Caries Prevention
	D1206	Topical application of fluoride varnish	2 per 12 months following perio surgery or active periodontal therapy	Caries Prevention
	D4341	Periodontal scaling and root planing — four or more teeth per quadrant	1 per 24 months per area of mouth	Diabetes Preterm Births Heart Disease
	D4342	Periodontal scaling and root planing — one to three teeth per quadrant	1 per 24 months per area of mouth	Diabetes Preterm Births Heart Disease
	D4355	Full mouth debridement to enable comprehensive evaluation and diagnosis	1 per lifetime	Diabetes Preterm Births Heart Disease
	D4910	Periodontal maintenance	2 in 12 months	Diabetes Preterm Births Heart Disease
	D7288	Brush biopsy — transepithelial sample collection	1 per lifetime	Oral Cancer
	Class III (or 50% if no Class III coverage is offered)	D4381	Localized delivery of antimicrobial agents via a controlled release vehicle into diseased crevicular tissue, per tooth	6 occurrences per 12 months; regardless of tooth number or area of the mouth

*The coverage level listed in the first column determines the amount United Concordia will pay toward the corresponding ADA code/procedure description shown. Please refer to your Schedule of Benefits for the amounts paid by the plan.