

Univera Access Dental

ACA-compliant dental plans that are designed specifically for small business

Univera Access Dental plans

Package ID	UAD-1500-PPO		UAD-1000-PPO		UAD-1000B-PPO		UAD-750-PPO	
	Pediatric (up to age 19)	Adult (19 and over)	Pediatric (up to age 19)	Adult (19 and over)	Pediatric (up to age 19)	Adult (19 and over)	Pediatric (up to age 19)	Adult (19 and over)
Deductible enrollee/ 2+ enrollees	None	None	\$25/\$75	\$75/\$225	\$25/\$75	\$75/\$225	\$25/\$75	\$100/\$300
Out of Pocket Maximum enrollee/ 2+ enrollees	\$350/\$700 ¹	N/A	\$350/\$700 ¹	N/A	\$350/\$700 ¹	N/A	\$350/\$700 ¹	N/A
Annual Maximum	N/A	\$1,500	N/A	\$1,000	N/A	\$1,000	N/A	\$750
Preventive Services	\$0 copay	100%	100%	100%	100%*	100%*	100%*	100%*
Basic Services	\$25 copay	50%	50%*	50%*	50%*	50%*	50%*	50%*
Major Services	\$100 copay	50%	50%*	50%*	50%*	50%*	50%*	N/A
Orthodontics⁰	\$300 copay	N/A	50%*	N/A	50%*	N/A	50%*	N/A

* Subject to plan deductible

¹ Out of Pocket Maximum applies to in network benefits only

⁰ Service requires prior authorization and must be medically necessary

Adult benefits subject to plan Annual Maximum

Same coverage for in and out-of-network; out-of-network is subject to balance billing (excluding Out-of-Pocket Maximum)

Service categories vary between Adult and Pediatric coverage.



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Atención: Si habla español, contamos con ayuda gratuita de idiomas disponible para usted. Consulte el documento adjunto para ver las formas en que puede comunicarse con nosotros.

注意：如果您说中文，我们可为您提供免费的语言协助。请参见随附的文件以获取我们的联系方式。



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For you.