



PPO Dental Insurance network

Smile-worthy coverage, more choices, greater savings

Large national network

As a Unum Dental member, you have the freedom to visit any dentist. Choosing an in-network dentist will provide you greater savings and a seamless experience.

Unum's large and growing dental network extends from coast to coast, offering convenient access to any dentist in our network. Visit unumdentalcare.com to find a dentist that is right for you and see your dental benefits go further.

Benefits of going in-network:

Savings — Get more from your plan. By spending less, going in-network allows you to stretch your benefits further.

Quality of care — All dentists in our network must meet and adhere to strict standards that ensure they possess the professional credentials, experience and training to provide the best quality care.

No claim forms — Most in-network providers will file claims on your behalf, providing a seamless, hassle-free experience.

How much can members save?

Dental costs vary from region to region, but Unum Dental members everywhere benefit two ways:

- ✓ Discounted fees for in-network services
- ✓ Insurance coverage of up to 50%, 80% or even 100% of some services

In-network savings with Unum Dental For example, a crown:¹

In-network dentist	
Network average negotiated fee ²	\$840
50% coinsurance	\$840 X 50% = \$420
Plan pays	\$420
Member pays ³	\$420
Out-of-network dentist	
Billed charge ⁴	\$1,923
Usual and customary allowed amount ⁵	\$644
50% coinsurance	\$644 X 50% = \$322
Plan pays	\$322
Member pays ⁶ (billed charge - co-insurance)	\$1,923 - \$322 = \$1,601
Savings of in-network	
Out-of-network member payment - in-network member payment	\$1601 - \$420 = \$1,181

Savings of \$1,181!

For this example, a member seeing an in-network provider would pay significantly less than what they would pay at an out-of-network provider.¹

Manage your benefits

- Search for in-network dental providers
- Access the dental health center
- Log in to your member portal, where you can:
 - Print ID cards
 - View claim history
 - Access coverage information



Find a network provider

- Click "Search Now" in the "Find a Dental Provider" section located on the left-hand side.
- Select to search by dentist name or location (city/state/zip).
- Confirm the dentist's name and address. Network dentists who practice at multiple offices may not be contracted in-network at every office. The network directory is updated monthly to reflect recently added providers and remove inactive ones.

Schedule your appointment

When scheduling your appointment, identify yourself as a **"Unum Dental"** member, and let the dental office know to check the network name and information on your member ID card. If your dentist doesn't recognize their participation in the network, call our Contact Center at 1-888-400-9304 or email ProviderRelations@unum.com. Please include the provider's name, address and phone number. Our team will be happy to reach out to the dentist.

We're growing our network for you!

If your dentist is not in-network, please send their contact information to NetworkRecruiting@unum.com and our team of network recruiters will reach out to them.



Virtual dental visits through TeleDentistry.com

24/7 dental care for dental emergencies when an in-person visit isn't an option. Available for active dental members as a preventive service.*

Visit unumdentalcare.com and click Virtual Dental Visits to get started.

This policy provides DENTAL insurance only.

1 For illustrative purposes only. Actual cost can vary based on care received, provider, geographical area, plan type and other factors. This example is for a full case predominantly base metal crown (D2791) and assumes the deductible has already been met.

2 The negotiated fee is the amount a participating provider contractually agrees to accept as payment in full for covered services. Based on average contracted rate for D2791 in zip code 75218.

3 The plan pays the participating provider's contracted amount less any coinsurance and deductible. The patient is responsible for their deductible and coinsurance.

4 Based on the 2024 average billed charges by out-of-network providers in zip code 75218.

5 Average fees charged for services within your geographic area. Carriers determine the payment they will approve for a visit or procedure using this average. If a dentist charges a fee that is higher than average, the patient is responsible for the difference.

6 The patient is responsible for the coinsurance, deductible and any balance between the billed amount and allowed amount.

*Virtual dentist visits are a preventive service and subject to the policy year maximum benefit.

A NETWORK ACCESS PLAN IS AVAILABLE. THIS AD IS NOT INTENDED FOR USE IN NEW MEXICO OR OREGON.

EXCLUSIONS AND LIMITATIONS

The following dental services are not covered unless stated otherwise in the Certificate of Coverage:

Any treatment which is elective or primarily cosmetic in nature and not generally recognized as a generally accepted dental practice by the American Dental Association, as well as any replacement of prior elective or cosmetic restorations;

Replacement of a removable device or appliance that is lost, missing or stolen, and for the replacement of removable appliances that have been damaged due to abuse, misuse, or neglect. This may include but not be limited to removable partial dentures or dentures;

Replacement of any permanent or removable device or appliance unless the device or appliance is no longer functional and is older than the limitation in the Schedule of Covered Procedures. This may include but not be limited to bridges, dentures and crowns;

Any appliance, service or procedure performed for the purpose of splinting, to alter vertical dimension or to restore occlusion;

Any appliance, service or procedure performed for the purpose of correcting attrition, abrasion, erosion, abfraction, bite registration, or bite analysis;

Charges for implants (except noted above), removal of implants, precision or semi-precision attachments, denture duplication, or dentures and any associated surgery, or other customized services or attachments;

Services provided for any type of temporomandibular joint (TMJ) dysfunction, muscular, skeletal deficiencies involving TMJ or related structures, myofascial pain.

Limitations: Multiple restorations on one surface are payable as one surface. Multiple surfaces on a single tooth will not be paid as separate restorations. On any given day, more than 8 periapical x-rays or a panoramic film in conjunction with bitewings will be paid as a full mouth radiograph.

Pre-estimates are recommended for any treatment expected to exceed \$300.

THIS POLICY PROVIDES LIMITED BENEFITS. This brochure is not intended to be a complete description of the insurance coverage available. The policies or their provisions may vary or be unavailable in some states. The policies have exclusions and limitations which may affect any benefits payable. For complete details of coverage and availability, please refer to Policy Form Series Dental – 20-GDN-POL, DN-2007, DN-2010 and DN-2015 (includes state abbreviations where used, for example, DN-2015-NY) or contact your Unum Dental representative.

The approved service area consists of all Massachusetts Except Dukes and Nantucket Counties.

Underwritten by Starmount Life Insurance Company, Baton Rouge, LA. In New York, plans underwritten by Provident Life and Casualty Insurance Company, Chattanooga, TN.



Better
benefits
at work.™