

### Dental Benefits Summary

No deductible. \$1,000 per calendar year maximum per individual.

Benefit Category	High Option
<b>Diagnostic &amp; Preventive Services</b> Dental Examinations Oral Prophylaxis (teeth cleaning) Fluoride Application (to age 19)  Counseling: Oral Hygiene Nutritional Counseling Plaque Control Program Pit & Fissure Sealants  Full Mouth X-rays Space Maintainers Bitewing X-rays	100% - 2 per 12 month period 100% - 2 per 12 month period / 1 addition during pregnancy 100% - 2 per 12 month period  Not Covered Not Covered Not Covered 100% - 1 per tooth per 3 years under age 16 on permanent 1 <sup>st</sup> & 2 <sup>nd</sup> molars 100% - 1 every 5 years 100% - 1 per 3 year period for members under age 19 100% - 1 set per 6 months under age 14 100% - 1 set in any 12 months age 14 and older
<b>Endodontic Services</b> (under local anesthesia) Pulpal Therapy Root Canal Treatment	100% - 1 per tooth per lifetime (tooth & age limitations apply) 100% - Root Canal Treatment: 1 per tooth per lifetime 100% - Root Canal Re-treatment: 1 per tooth per lifetime
<b>Restorative Services</b> (under local anesthesia) Basic Restorative Services (amalgam, silicate, acrylic, composite fillings) Recementations and Recement Cast or Pre-fabricated Post and Care Single Unconnected Inlays, Onlays and Crowns	100% - not within 12 months of previous placement  100% - 1 per 12 month period  Not Covered
<b>Oral Surgery</b> (under local anesthesia) Simple Extractions Most Other Oral Surgery	100% Not Covered
<b>Periodontics -- Gum Treatment</b> (under local anesthesia) Nonsurgical & Surgical	Not Covered
<b>Prosthetics</b> Fixed Bridgework (including abutment inlays, onlays & crowns, & pontics)	Not Covered
<b>Orthodontics</b>	Not Covered

#### Monthly Premiums

Individual	\$18.56
Employee/Spouse	\$37.69
Employee/1 Dependent	\$37.69
Employee/Children	\$65.14
Family	\$65.14

Rates are effective through June 30, 2009.  
 To find a participating provider, please search/visit the Concordia Advantage Network. Please visit [www.ucci.com](http://www.ucci.com) or call 800.332.0366 for more information.

Note: This description outlines the principal features of the products offered by PCI Insurance, Inc. It is not to be considered the contract of benefits and provisions. The complete terms of coverage are issued by the individual carriers. Refer to the certificate of coverage for additional information.

If services are performed by a non-participating dentist, member is responsible for completing and submitting claim forms. Payment will be forwarded to member unless member has assigned benefits to the non-participating dentist.