



Uintah School District

Welcome to the **TDA-Companion Group Indemnity Dental Plan** underwritten by Companion Life Insurance Company. The **TDA-Companion Dental Plan** offers you the option of receiving your dental care from any dentist you choose (Out-of-Network) or from a Participating Plan Dentist (In-Network); and you don't need to make that decision until you need dental care! However, should you elect to receive your dental care from an In-Network dentist your out of pocket costs will be less.

The following is a brief outline of your dental coverage. For additional information please refer to the employee booklet/certificate you will receive after enrollment or contact TDA.



	(In-Network)	(Out-of-Network)
Class I – Preventive -Oral Examinations (two every twelve months) -Cleanings (once every six months) -X-Rays (bite-wings once every six months) -Palliative Emergency Treatment	100%	100%*
Class II – Basic Dentistry -Restorations (fillings) -Extractions	100%	100%*
Class III – Major Dentistry -Crowns -Dentures -Endodontics (root canal therapy) -Periodontal Services (treatment of gum tissue) -Bridges -Other Prosthetic Services -Oral Surgery	50%	50%*
Class IV – Orthodontics	50%	50%*
Deductible: \$100.00 Lifetime Deductible Per Person		
Maximum Benefit; \$1,000.00 per person per calendar year for all Class I, II & III expenses		
Lifetime Orthodontic Maximum: \$1,200.00 per child under the age of 19 only		

Class III Waiting Period: 12 Months
 Class IV Waiting Period: 12 Months

*Subject to TDA's Allowable MPR Fee's
 (Maximum Plan Reimbursement)

Total Dental Administrators, Inc.
 969 East Murray Holladay Road, Suite 4E
 Salt Lake City, Utah 84117
 Toll Free: (800) 880-3536 – Local: (801) 268-9740
 Fax: (801) 268-9873
 Web: www.totaldentaladmin.com
 E-mail: customerservice@totaldentaladmin.com



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EPO

The following is a brief outline of dental benefits offered through your employer which is intended to help you understand your benefits and does not guarantee coverage. For a complete list of covered benefits please refer to your employee booklet/certificate you will receive after enrollment or contact TDA

	In-Network	Out-of-Network
Provider Network/Reimbursement	PPO Provider Network	No Coverage
Class 1 -Preventative Services -Oral Examinations (2 every 12 months) -Cleanings (1 every 6 months) -X-Rays (bitewing 1 every 6 months) -Palliative Emergency Treatment	100%	0%
Class 2 -Basic Services -Restorations (fillings) -Extractions -Oral Surgery	80%	0%
Class 3 -Endodontics (root canal therapy) -Periodontics (treatment of gum tissue) -Major Dentistry -Crowns -Dentures -Bridges -Other Prosthetic Services	50%	0%
Class 4 -Orthodontic Services	15%-25% Discount	0%
Deductible	\$50.00/\$150.00 applies to Class 2 and Class 3	
Annual Maximum per Calendar Year	\$1,200.00 applies to Class 1, Class 2 and Class 3	
Lifetime Orthodontic Maximum	15%-25% Discount applies to	

Class 3 Waiting Period: None
 Class 4 Waiting Period: None
 (waiting period applies only to new applicants)

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