



## Pennsylvania Builders Association Benefits Trust

### Schedule of Benefits—Concordia Flex—BASIC

**Network: ParNet**

Benefit Category	Plan Pays*
<b>Class I—Diagnostic/Preventive Services</b>	
Exams	100%
Cleanings & Fluoride Treatments	
X-rays	
Sealants	
Palliative Treatment (Emergency)	
<b>Class II—Basic Services</b>	
Space Maintainers	100%
Basic Restorative (Fillings, etc.)	
Simple Extractions	
Endodontics	
General Anesthesia	
<b>Class III—Major Services</b>	
Inlays, Onlays, Crowns	Not Covered
Repairs of Crowns, Inlays, Onlays	
Repairs of Bridges	
Denture Repair	
Surgical Periodontics	
Complex Oral Surgery	
Prosthetics (Bridges, Dentures)	
<b>Orthodontics</b>	
Diagnostic, Active, Retention Treatment	Not Covered
<b>Program Maximums/Deductibles</b>	
Annual Program Maximum (per covered person)	\$1000
Annual Program Deductible	\$0

\*The listed network percentages represent the portion of United Concordia's maximum allowable charges (MACs) for which the plan will be responsible. Network providers agree to accept United Concordia's MAC for covered services as payment in full and also agree to file claims for you. If you or your family members receive services from a non-network provider, United Concordia will apply the percentages shown to the [non-network reimbursement] for covered services and you will be responsible for the difference, up to the provider's charge. United Concordia's standard exclusions and limitations apply.