

Dental and Vision Plans and Cost Schedules

Calendar Year 2025

University-sponsored plans for post-65 dental and vision coverage are available separately. When assessing your needs for dental and vision services, keep in mind that the Medicare Advantage HMOs and PPOs may provide limited benefits for dental and vision care services. DDB credits cannot be used to cover the cost of the dental plan or vision plan.

New for 2025, the provider network has been expanded to the **Elite Prime** network.

Dental Plan

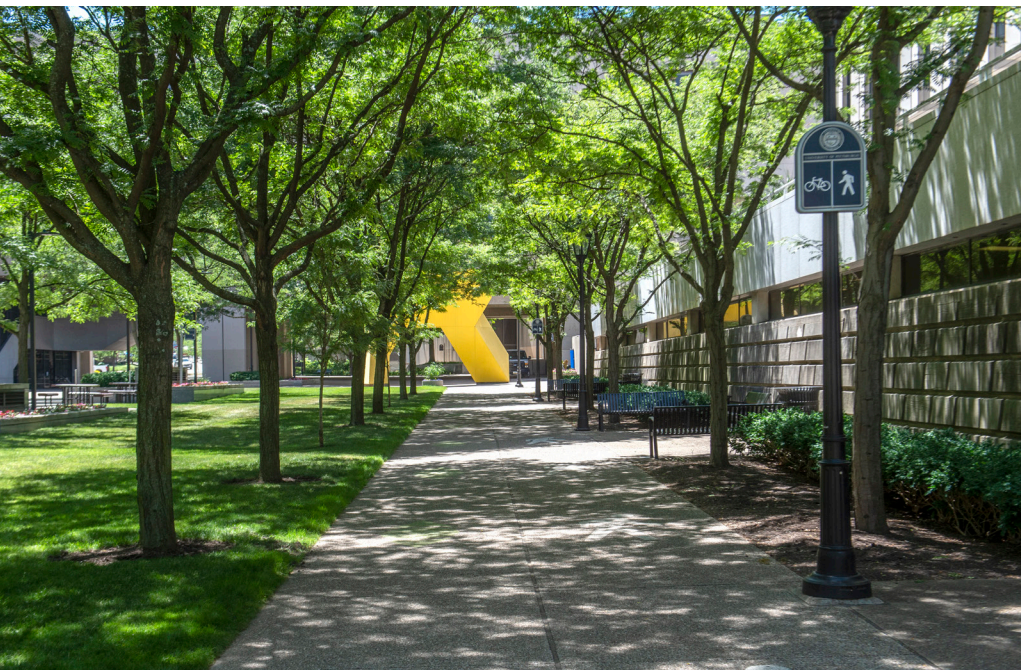
United Concordia Dental

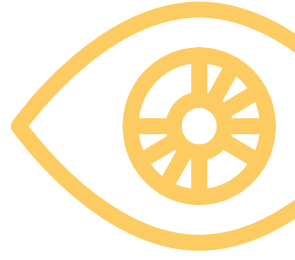
Retiree Cost: **\$21.70 per month** for Individual Coverage

Benefit Category	In-Network	Out-of-Network
Diagnostic/Preventive Services	100%	100%
Basic Services (includes Periodontal Maintenance Cleanings)	70%	70%
Major Services	Non-surgical Periodontics: 40% Member pays reduced discounted fee for other Class III Major Services*	Non-surgical Periodontics: 40% Member pays dentist's full charge for all other Class III Major Services
Annual Deductible (per person)	\$25 Applies to Class I and Class II Services	\$75 Applies to Class I and Class II Services
Maximum the insurance will cover per year (per person)	\$750 Class I Services do not apply	\$750 Class I Services do not apply

* To find a participating provider in the Elite Prime national dental provider network, use the Find a Dentist tool on unitedconcordia.com.

The same network can be utilized for the discount services (Major and Orthodontic) listed above. Select the Elite Prime network when entering your search preferences, then look for the dentists who have a solid square symbol (■) next to their name. You may also contact United Concordia at 1-877-215-3616.





Vision Plan

Davis Vision by MetLife

Retiree Cost: **\$7.98 per month** for Individual Coverage

Benefit Category	In-Network	Out-of-Network
Eye Examination	Covered in full annually	Up to \$30
Eyeglass Lenses	Covered in full every 12 months	Single Vision: \$25 Bifocal: \$35 Trifocal: \$45 Lenticular: \$60
Frame	Plan pays up to \$80 every 12 months Fashion Frame: Covered in full up to \$100 Designer Frame: \$15 copayment Premier Frame: \$35 copayment A \$130 allowance plus 20% off any balance is available for frames purchased at Visionworks' locations	Up to \$30
Contacts (in lieu of eyeglasses)	Evaluation and fitting: Covered in full Plan pays up to \$75 for provider-supplied contacts Medically necessary: Covered in full	Daily wear: up to \$30 Standard daily wear: up to \$48 Elective: up to \$75 Medically necessary: up to \$225

For more details, contact Davis Vision by MetLife at 1-888-777-7418. You can also access self-service by visiting [metlife.com/mybenefits](https://www.metlife.com/mybenefits).

