



## DENTAL PLAN ENHANCEMENTS

**Date:** March 11, 2013

**To:** All Members of the UCE of FIT Welfare Trust Fund

**From:** Linda Tain, Chairperson – UCE of FIT Welfare Trust Fund

**Great news!** Effective March 1<sup>st</sup> 2013 The UCE of FIT Welfare Trust Fund has improved the dental benefits for its members. The enhancements include:

- **Remove the annual deductible for preventive treatments / Eliminate copays on preventive services** (Any claims incurred by members 1/1/13-3/1/13 will be reprocessed)
- **Reduce the annual deductible for all other charges to \$50**
- **Upgrade to the "Premier Dental Network"** (Additional increase of 244 new providers in NY, 120 in NJ and 107 in PA)
- **Increase benefit payments for the following services:**

ADA	ADA DESCRIPTION	CURRENT ALLOWANCE	3/1/13 ALLOWANCE
01110	PROPHYLAXIS	42.00	50.00
00120	PERIODIC ORAL EXAMINATION	36.00	40.00
00274	X-RAYS 4 BITEWINGS	29.00	35.00
00220	X-RAY 1 PERIAPICAL	7.00	10.00
02750	CROWN-PORC.FUSED TO METAL	384.00	400.00
02386	RESIN-2 SURFACES,POSTERIOR	60.00	75.00
02387	RESIN-3 OR MORE SURFACES,POST.	60.00	80.00
07210	SURGICAL EXTRACTION	96.00	110.00

For more information, please contact the Welfare Trust Fund office at 212 217-3377 or SIDS:

**S.I.D.S. / A.S.O., Dept.13**  
**P.O. Box 9005**  
**Lynbrook, NY 11563**  
**516-396-5500/718-204-7172**

*Claim Forms are available from the Fund Office and S.I.D.S./A.S.O. You can also obtain claim forms from the S.I.D.S. website at [www.asonet.com](http://www.asonet.com). Dental claims must be filed within 12 months after the date of service. Claims filed later than 12 months from the date of service will not be reimbursed. If you would like the payment made directly to your Dentist, you may do so by signing the "Authorization to Assign Benefits" box on the claim form. Reimbursement will be at the rate of 100% of the fees listed in the **Schedule of Covered Dental Expenses**, not to exceed actual Dentists charges.*