

Dental

Southern Utah University offers the following dental plans through **Samera Health** for the 2025-2026 plan year. A brief summary of the in-network plan details and coverage amounts for this plan is shown below.

PPO Dental Plan

In-Network Plan Details	
Deductible (PPY)	None
Annual Maximum	\$2,000 Per Individual
Preventive & Diagnostic Services Exams, Cleanings, Fluoride, X-Rays	No Waiting Period Covered 100%
Basic Services Fillings, Non-Surgical Extractions, Oral Surgery	No Waiting Period 80 / 20
Major Services Bridges, Crowns	No Waiting Period 50 / 50
Endodontics & Periodontics Services	Covered under Basic Services
Orthodontics Lifetime Maximum	\$1,500 Per Individual
Orthodontics Dependents (Age 7 to 19) & Adults	No Waiting Period 50 / 50
Out-of-Network Plan Details *	
Deductible (PPY)	None
Annual Maximum	\$2,000 Per Individual (Combined Above)
Out-of-Network Services	Coverage amounts vary for out-of-network services, please refer to the carrier's materials for specific details.

AD: After Deductible

PPY: Per Plan Year

* Member will be responsible for amounts billed by non-participating providers in excess of eligible dental expense amount.

The table above illustrates your in-network benefits in summary only. For a complete description of benefits, coverages, limitations, and exclusions, consult your plan documents available from Human Resources or at www.samarahealth.com.