



# Preventive Dental Services



## Did you know?

The University of Cincinnati Medical Student Health Insurance Plan (SHIP) now covers preventive dental services. This enhancement guarantees that students receive crucial dental care, essential for their overall health and well-being.

### Here's what's covered:

- X-rays
- Limited to one adult preventive dental exam per policy year

The plan offers the same coverage for both in-network (PPO) and out-of-network (OON) providers, covering 100% of the Allowed Amount with no deductible required.

If your provider is out of network, coverage will still be provided at the PPO level. However, if you incur any out-of-pocket expenses, you may need to submit a claim to UHC for reimbursement.

### Here's how to file a claim for reimbursement:

- 1 First**, go to: [www.UHCSR.com](http://www.UHCSR.com) and log into My Account. Select “**Submit Claim**” from the My Account dashboard. From the Claims Submission tab select “**Submit Claim**” to open the online form.
- 2 Next**, choose the type of claim you need to file: **Medical**. Fill in the required details and attach any relevant documents, receipts, etc. Once all required information is provided in order, submit the form.
- 3 After** the claim has been submitted it will be reviewed. If additional information is needed you will receive an email from UHCSR. Once the claim has been processed, access the “Claims Summary” tab to view the final details.



For general Customer Service inquiries, email [customerservice@uhcsr.com](mailto:customerservice@uhcsr.com).



For Claims Questions, email [claims@uhcsr.com](mailto:claims@uhcsr.com).

This plan is underwritten by UnitedHealthcare Insurance Company and is based on policy 2024-202-1. For a full description of coverage, including costs, benefits, exclusions, any reductions or limitations, and the terms under which the coverage may be continued in force, log on to [www.uhcsr.com/uc](http://www.uhcsr.com/uc) to review the plan information.

UnitedHealthcare Student Resources does not discriminate on the basis of race, color, national origin, sex, age or disability in health programs and activities.

ATTENTION: Language assistance services, free of charge, are available to you. Please call 1-866-260-2723.

ATENCIÓN: Usted tiene a su disposición servicios de asistencia en otros idiomas, sin cargo. Llame al 1-866-260-2723.

注意：免費提供語言協助服務。請致電 1-866-260-2723。

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