

Don't Let Cavities Eat Into Your Retirement Savings

Enroll in a **New Hanover Health Advantage Medicare Plan** that now includes a **\$3,000** annual benefit. The dental allowance includes coverage for:

- Preventive services (exams and cleanings)
- Diagnostic services (radiographs - X-rays)
- Comprehensive services (fillings, crowns, bridges, and more)

With dental coverage through New Hanover Health Advantage, you can:

- Have access to your dentist of choice
- Choose a Medicare Advantage network provider that offers the most significant discounts, no balance billing and files claims on your behalf
- Enjoy improved overall health because

1



120+ signs of nondental disease can be detected in a routine oral exam¹

2



A buildup of dental plaque can increase the risk for heart disease²

3



Gum disease has been linked to diabetes risk by making the body more resistant to insulin³

Learn more and enroll in a New Hanover Health Advantage Medicare plan today by visiting www.firstcarolinacare.com/NHHA or call (855) 291-9336.

Visit www.providers4you.com/NorthcarolinaMedicareAdvantage to find a Medicare Advantage network provider.

FirstCarolinaCare Insurance Company is a health plan with a Medicare contract. Enrollment in FirstCarolinaCare depends on contract renewal.

¹ James W. Little et al., Dental Management of the Medically Compromised Patient (St. Louis: Mosby, 2012)

² TE Van Dyke and AJ van Winkelhoff, "Infection and Inflammatory Mechanisms," Journal of Clinical Periodontology 40, suppl. 14 (2013): S1-S7.

³ Centers for Disease Control and Prevention. (2021, May 7). Diabetes and Oral Health. Centers for Disease Control and Prevention. Retrieved June 8, 2022, from <https://www.cdc.gov/diabetes/managing/diabetes-oral-health.html>



New Hanover
Health Advantage

Visit www.providers4you.com/Northcarolina
MedicareAdvantage to find a Medicare
Advantage network provider.

Select Plan

Annual Dental
Benefit: \$3,000
(Applies to all
covered services
in-network and
out-of-network)

Platinum Plan

Annual Dental
Benefit: \$3,000
(Applies to all
covered services
in-network and
out-of-network)

Freedom Plan

Annual Dental
Allowance: \$3,000
(Applies to all
covered services
in-network and
out-of-network)

Preventive:

Exam & cleaning

Covered at 100%

Covered at 100%

Covered at 100%

Bitewing Radiographs

Covered at 100%

Covered at 100%

Covered at 100%

Diagnostic:

Emergency Palliative Treatment - to relieve pain

\$35 Copay, then
30% Coinsurance

\$35 Copay, then
30% Coinsurance

Covered at 100%

Radiographs - full mouth series, periapical or
panoramic X-ray, payable once every 5 years

\$35 Copay, then
30% Coinsurance

\$35 Copay, then
30% Coinsurance

Covered at 100%

Comprehensive Services:

Fillings - amalgam & resin based composite
fillings only

\$35 Copay, then
30% Coinsurance

\$35 Copay, then
30% Coinsurance

Covered at 100%

Endodontics - root canals

\$35 Copay, then
50% Coinsurance

\$35 Copay, then
50% Coinsurance

Covered at 100%

Periodontics Services - to treat gum disease

\$35 Copay, then
50% Coinsurance

\$35 Copay, then
50% Coinsurance

Covered at 100%

Oral Surgery - extractions and dental surgery

\$35 Copay, then
50% Coinsurance

\$35 Copay, then
50% Coinsurance

Covered at 100%

Crown or Partial Crown Services
(inlay and onlay), Crown repair

\$35 Copay, then
50% Coinsurance

\$35 Copay, then
50% Coinsurance

Covered at 100%

Implants

\$35 Copay, then
50% Coinsurance

\$35 Copay, then
50% Coinsurance

Covered at 100%

Surgical drainage of an abscess tooth

\$35 Copay, then
50% Coinsurance

\$35 Copay, then
50% Coinsurance

Covered at 100%

Dentures

Complete Upper Denture

\$35 Copay, then
50% Coinsurance

\$35 Copay, then
50% Coinsurance

Covered at 100%

Complete Lower Denture

\$35 Copay, then
50% Coinsurance

\$35 Copay, then
50% Coinsurance

Covered at 100%

Upper Partial Denture

\$35 Copay, then
50% Coinsurance

\$35 Copay, then
50% Coinsurance

Covered at 100%

Lower Partial Denture

\$35 Copay, then
50% Coinsurance

\$35 Copay, then
50% Coinsurance

Covered at 100%

Denture Adjustment, Repair or Reline - for upper
and lower

\$35 Copay, then
50% Coinsurance

\$35 Copay, then
50% Coinsurance

Covered at 100%

Anesthesia

Evaluation for sedation or generation anesthesia

\$35 Copay, then
50% Coinsurance

\$35 Copay, then
50% Coinsurance

Covered at 100%

Deep Sedation/General Anesthesia

\$35 Copay, then
50% Coinsurance

\$35 Copay, then
50% Coinsurance

Covered at 100%

IV Sedation

\$35 Copay, then
50% Coinsurance

\$35 Copay, then
50% Coinsurance

Covered at 100%

Occlusal Guard

Adjustment of Occlusal Guard

\$35 Copay, then
50% Coinsurance

\$35 Copay, then
50% Coinsurance

Covered at 100%

Full-Arch Hard Occlusal Guard - top or bottom

\$35 Copay, then
50% Coinsurance

\$35 Copay, then
50% Coinsurance

Covered at 100%