

2025-2026 University of Virginia Dental Summary of Benefits

Lim its	In -Network	Out-of-Network
Plan Maximum	\$750 (Preventative services do not apply to this maximum)	
Plan Deductible	\$50	\$50
Plan Coinsurance	In-Network	Out-of-Network
Preventative Care**	0%	0%
Basic Services	20%	20%
Major Services	40%	40%
Orthodontia	Not covered	

****Further discounts apply per service based on provider, giving you more savings under UHCSR's Dental plan when you stay In Network****

**Coverage provided through
August 1st, 2025- July 31st, 2026**



Annual

Student :	\$311.40
Student & Spouse:	\$619.71
Student & Child(ren):	\$858.55
Student & Family:	\$1,067.91

For more details regarding the
University of Virginia
Student Health Insurance Program
please visit: www.haylor.com/uva
833-401-3048
student@haylor.com



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Services:	Benefits:
Preventative Services	<ul style="list-style-type: none">• Office Visits: 2 routine visits and 2 diagnostic visits per policy year• Cleanings: 2 treatments per policy year• Application of fluoride (under age 16): 1 application per policy year• Bitewing X-Rays: 1 set per Policy year
Basic Restorative Services* Resin-based composite fillings (other than for molars), Recementation, Crowns, Prefabricated crowns (excluding temporary crowns), Root canal therapy and retreatment (Anterior & Bicuspid)	Major Services* Inlays, On lays, Labial veneers, Post and core, Repairs - inlay, onlay, veneer, crown, Root canal therapy and retreatment (Molar), Removal of impacted tooth (Partially bony & Completely bony), Dentures and partials *Please note that these services have different timeframes in which benefits are payable, please consult the benefits summary for specific allotments.

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