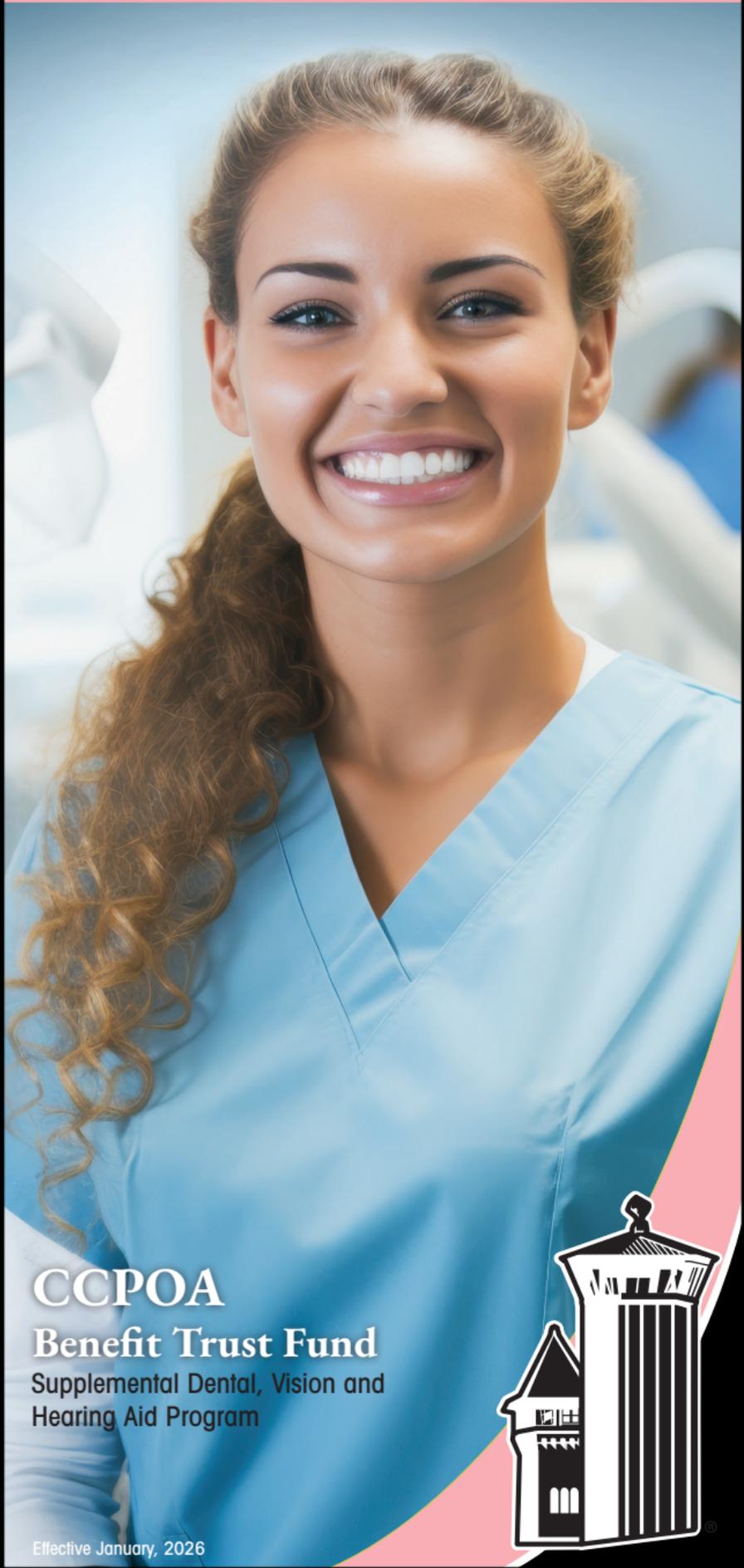


# Piggyback

*Enhanced Dental, Vision and  
Hearing Aid Coverage*



**CCPOA**

**Benefit Trust Fund**

Supplemental Dental, Vision and  
Hearing Aid Program



Effective January, 2026

## What is Piggyback?

Piggyback is a supplemental program provided by the CCPOA Benefit Trust Fund that helps to offset the out-of-pocket expenses incurred from the usage of your Dental, Vision and Hearing Aid programs.

## Dental Benefit

Piggyback pays a portion of the fees your dentist charges, after benefits have been paid by your primary dental program. The charges submitted for reimbursement must be for services specified in the Summary Program Description (SPD). Dental deductibles are not eligible for reimbursement.

The maximum dental benefit per family per calendar year is \$2,000.

## Orthodontic Care Benefits

Piggyback will pay a 50% benefit for orthodontic care with a family lifetime maximum benefit of \$1,000. There is a one year waiting period for this coverage. To be covered, orthodontic treatment must start after the waiting period.

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**NOTICE:** The CCPOA BTF recommends that you request a pre-authorization for dental services when the treatment plan exceeds \$300. Ask your dental office to submit a written proposed treatment plan to United Concordia Dental for approval.

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## Vision Care Benefit

Piggyback provides reimbursement for the following expenses:

- Exam co-pay and material co-pay
- Frame coverage, up to \$15 per pair, not to exceed six pairs of frames per family per calendar year
- Maximum vision benefit per family per calendar year is \$300

For Retirees not enrolled in a VSP vision plan, please refer to the Piggyback SPD for coverage allowances.

## Hearing Aid Benefit

Provides reimbursement to you for a portion of the charges for a hearing exam and hearing devices on a fee-for-service basis.

**Piggyback will reimburse fifty percent (50%) of the expenses incurred for the examination and fifty percent (50%) of the expenses incurred for the hearing device(s) once every thirty-six (36) months, with a family maximum of Five Hundred Dollars (\$500.00).**

The hearing device(s) must be purchased within 90 days of the hearing test in order to qualify for this benefit. Battery replacement, repairs and maintenance of hearing device(s) are not covered benefits.

## Who's Eligible for Piggyback?

- All actively at work, dues-paying CCPOA members and their dependents.
- All dues-paying members of CCPOA Retired Chapter and their dependents.
- Employees of the CCPOA or the CCPOA Benefit Trust Fund as well as their dependents.

This is a brief summary of the benefits provided through the CCPOA Benefit Trust Fund's Piggyback Program. For a more detailed and exact explanation of benefits, please see the Summary Program Description. To obtain a copy, visit our website: [www.ccpoabtf.org/Forms](http://www.ccpoabtf.org/Forms)

# Piggyback

Enhanced Dental, Vision and  
Hearing Aid Coverage

## Here is an example of how Piggyback works

This is only an example of coverage. Example based on CCPOA Dental Program benefits and assumes you use a United Concordia Dental provider and have met your \$50.00 deductible.

### Gold Crown

(procedure 2790):

**Dentist Charges . . . . . \$848.00**

### Coverage with Piggyback:

United Concordia Dental pays

80% of allowable (\$848) . . . . . 678.40

Piggyback pays 20% . . . . . \$169.60

Total Payout . . . . . \$848.00

**Out-of-Pocket . . . . . \$0.00**

### Coverage without Piggyback:

Your Dental coverage pays

80% of allowable (\$800) . . . . . \$678.40

**Out-of-Pocket . . . . . \$169.60**

## Piggyback is Affordable!

ACTIVE	RETIRED
<b>\$16.00 per month</b> (CCPOA Member Only)	<b>\$18.00 per month</b> (CCPOA Member Only)
<b>\$28.00 per month</b> (CCPOA Family)	<b>\$34.00 per month</b> (CCPOA Family)



## FILING A CLAIM IS SIMPLE:

A claim must be submitted no later than one year after the date the primary carrier paid the original claim. All claims must have the following information: participant's name and social security number, patient's name, date of service, services rendered, and charges for each service.

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*The following is a brief description of how to submit a claim for Piggyback:*

### Dental Claims

You or your dentist may submit an itemized claim and an itemized primary insurance statement to United Concordia Dental for reimbursement.

*Dental Claims need to be mailed to:*

United Concordia Dental  
Dental Claims  
P.O. Box 69421  
Harrisburg, PA 17106-9421  
Customer Service: 1-844-789-1713

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### Vision Claims

Ask your eye care provider for an itemized statement of your out-of-pocket expenses and submit the statement to the CCPOA BTF for reimbursement.

### Hearing Aid Claims

Once an attending physician writes a prescription for the hearing aid device and the device has been purchased, submit a copy of the itemized statement to the CCPOA BTF for reimbursement.

*Vision and Hearing Claims need to be mailed to:*

CCPOA Benefit Trust Fund,  
2515 Venture Oaks Way, Suite 200,  
Sacramento, CA 95833-4235.

For Dental benefits,  
contact United Concordia  
Dental: **844.789.1713**

For Vision or Hearing  
Aid benefits, contact  
the Benefit Trust Fund:  
**916.779.6300**

## **Pre-Authorization for Piggyback Dental**

If your dental work will cost more than \$300, ask your dentist to submit the anticipated treatment and charges before work is started.

The pre-authorization is prepared by United Concordia Dental and returned to your dentist with the amount to be paid by the Program.

You will receive a copy of the pre-authorization by mail.

A pre-authorization is recommended, but not required. It is an estimate of benefits and not a guarantee of payment.

## **What's new in Retired Piggyback?**

The Trust eliminated the annual Open Enrollment for Piggyback. Now you can enroll anytime throughout the year if you want to sign up for Piggyback.

Because the Trust knows many Retired Members have young families, an orthodontic benefit has been added to the Retired program. There is a one-year wait from the time you enroll in Piggyback until you are covered for this benefit—check with the Trust for limitations.

Piggyback will pay a 50% benefit for orthodontic care with a family lifetime maximum benefit of \$1,000.

To be covered, treatment must begin after the waiting period.



**We've Got You Covered.**

**916-779-6300**

**1-800 In-Unit-6**



**CCPOA  
Benefit Trust Fund**

2515 Venture Oaks Way, Suite 200  
Sacramento, CA 95833-4235

**[www.ccpoabtf.org](http://www.ccpoabtf.org)**