

Enhanced Dental Plus PPO 25/500*

THIS MATRIX IS INTENDED TO BE USED TO HELP YOU COMPARE COVERAGE BENEFITS AND IS A SUMMARY ONLY. THE EVIDENCE OF COVERAGE SHOULD BE CONSULTED FOR A DETAILED DESCRIPTION OF COVERAGE BENEFITS AND LIMITATIONS.

	In-Network Coverage	Out-of-Network Coverage
Calendar Year Deductible	\$25 per member / \$75 per family	\$25 per member / \$75 per family
Deductible applies to	Basic and major services only	All services except orthodontia
Calendar Year Maximum per Member	\$500	
Orthodontia Lifetime Maximum per Member	\$500	

Covered Services	Member Coinsurance Amounts	
	In-Network Coverage	Out-of-Network Coverage
Diagnostic and Preventive Services – cleanings, exams, X-rays	No charge	20%
Basic Restorative Services ¹ – minor restorations, oral surgery	20%	40%
Major Restorative Services ¹ – bridges, crowns, dentures, endodontics, implants, periodontics	50%	50%
Orthodontics ^{1,2} – child(ren) only	50%	50%

Please Note: Benefits are subject to modification for subsequently enacted state or federal legislation.

* Pending regulatory approval.

1 Waiting Periods

- No waiting periods for cleanings, exams and X-rays
- Six-month waiting period for basic services
- 12-month waiting period for major services and orthodontia

2 Orthodontic footnotes:

- Dependent children are covered until the end of the month of their 26th birthday.
- \$50 deductible
- \$250 annual maximum benefit per individual
- \$500 lifetime maximum benefit per individual
- All procedures performed in connection with orthodontic treatment are payable as orthodontia.
- Benefits for the initial placement will not exceed 20% of the lifetime maximum benefit amount for orthodontia. Periodic follow-up visits will be payable on a monthly basis during the scheduled course of the orthodontic treatment. Allowable expenses for the initial placement, periodic follow-up visits and procedures performed in connection with the orthodontic treatment, are all subject to the orthodontia coinsurance level and lifetime maximum benefit amount as defined in the Summary of Benefits and Member Copayments.
- Orthodontic benefits end at cancellation of coverage.