

Stand Alone Dental Plan – “Dental Wellness Option”

Plan Overview	Member Pays
Deductible	\$50 per member
Diagnostic Services	
Oral Exams <i>twice per year</i>	\$0
X-Rays	
Periapicals	
Bitewing Radiographs <i>once every two years</i>	
Preventive Services	
Cleanings <i>twice per year</i>	\$0
Fluoride <i>twice per year, under age 19</i>	
Sealants	
Minor Restorative	
Filings	40% after deductible
Major Restorative	
Simple Extractions	not covered, members eligible for discounts
Surgical Extraction	
Endodontic (i.e. Root Canal Treatment)	
Periodontics	
Crowns and Cast Restorations	
Prosthodontics (i.e. Dentures)	
Implants	
Other Services	
Medically-Necessary Orthodontic Services	not covered, members eligible for discounts
Waiting Periods and Plan Maximums	
Applicable Waiting Period for Benefit	
Diagnostic and Preventive Services	no waiting period
Minor Restorative	6 months
Major Restorative and Restorative	n/a
Plan Maximum	\$750 per member

This Plan Design sample is representative and is not intended to be a legal contract. Please see the actual plan documents for a full list of benefit coverage, exclusions and the terms of the policy.