

Voluntary Dental Plan Options (100% Employee Paid) with Orthodontics

Effective Date: October 1, 2022

*The Nonparticipating Dentist Fee may be less than what your dentist charges and will be responsible for the difference
This information is intended as a benefit summary only. It does not include all of the benefit provisions, limitations and qualifications. If this information conflicts in any way with the contract, the contract will prevail.

	UNUM PPO Dentist	Non- Participating Dentist*
Payment Schedule	Fee Schedule	90th Percentile
Deductible		
Individual		\$0
Family		\$0
Waived for Preventive?		N / A
Annual Maximum Rollover	Included; \$350 annually	
Diagnostic and Preventative Services		
Exams & Cleanings (2 per year), Fluoride, Space Maintainers	100%	100%
Emergency Palliative Treatment - to temporarily relieve pain	100%	100%
Sealants - to prevent decay of permanent teeth	100%	100%
Brush Biopsy - to detect oral cancer	100%	100%
Radiographs - X-rays (bitewings 1 per year - full mouth 1 in five year	100%	100%
Basic Services		
Minor Restorative Services - fillings and crown repair	80%	80%
Endodontic Service - root canals	80%	80%
Periodontics Services - to treat gum disease	80%	80%
Oral Surgery Services - extractions and dental surgery	80%	80%
Other Basic Services - misc. services	80%	80%
Relines and Repairs - to bridges, implants and dentures	80%	80%
Major Services		
Major Restorative Services - crowns	50%	50%
Prosthetic Services - bridges, implants and dentures (payable once per tooth per five-year period)	50%	50%
Orthodontic Services		
Orthodontic - braces	50%	50%
Orthodontic Age Limit	Up to Age 19	
Annual Benefit Maximum	\$1,500	
Ortho Lifetime Maximum	\$1,500	
	Monthly Rates	
Employee	\$46.90	
Employee + 1	\$92.04	
Employee + Family	\$168.03	
	1 Year Rate Guarantee	
	Bi-Weekly 24 Pays	Bi-Weekly 18 Pays
Employee	\$23.45	\$31.27
Employee + 1	\$46.02	\$61.36
Employee + Family	\$84.02	\$112.02