

Dental Benefit Summary and Rates

Renewal		
Plan: P9558 ¹ / Type: DPPO		
	Benefit	In/Out
Plan Maximums	Annual In/Out of Network	\$1,000 / \$1,000
	Ortho Lifetime	\$1,000 / \$1,000
Deductible	Individual/Family	\$50 / \$150
Waiting Period	Major Services	NO WAIT
Coinsurance	Preventive	100% / 100%
	Minor Restore	80% / 80%
	Endo/Perio/Oral [*]	50% / 50%
	Major Services	50% / 50%
	Orthodontia	50% / 50%

	Enrollment	Rate
Employee		\$24.10
Empl + Spouse		\$48.19
Empl + Child		\$61.45
Empl + Fam		\$90.53