



Choice PPO Single Option

Category/Plan Option	Choice PPO	
	In Network	Out of Network
DIAGNOSTIC & PREVENTIVE		
Periodic oral examinations	100%	100%
Teeth Cleaning	100%	100%
Bitewing X-rays	100%	100%
BASIC RESTORATIVE		
Fillings	80%	80%
Simple extractions	80%	80%
Denture repairs	80%	80%
General anesthesia	80%	80%
ENDODONTICS		
Root canals	50%	50%
PERIODONTICS		
Scaling and root planing	50%	50%
Gingivectomy/gingivoplasty	50%	50%
ORAL SURGERY		
Extraction of impacted teeth	50%	50%
MAJOR RESTORATIVE		
Inlays and onlays	50%	50%
Crowns	50%	50%
Dentures	50%	50%
Implants (in lieu of a 3-unit bridge)	50%	50%
Fixed bridges	50%	50%
ORTHODONTICS	OrthoSelect Available (see brochure for details)	
CALENDAR YR DEDUCTIBLE (waived for Preventive)		
Individual	\$50	\$50
Family	\$150	\$150
CALENDAR YR MAXIMUM	\$1,000	
MAXIMUM ROLLOVER	Up to an Additional \$1,000	
DEPENDENT AGE LIMIT	Up to Age 19	
FULL TIME STUDENT AGE LIMIT	Up to Age 23	
OUT OF NETWORK REIMBURSEMENT	80 th Percentile of UCR	

If you have questions or need additional information, visit www.dentaquestdental.com or call Customer Service at 1-800-334-6277.

Additional Plan Information

- These plans are eligible for *Maximum Rollover*, allowing you to get more out of your dental coverage by rolling over a portion of your unused benefit dollars from one year to the next. See the brochure for more details or visit <http://www.dentaquestdental.com/pdfs/Rollover.pdf>.
- There are no waiting periods, pre-existing condition limitations, or missing tooth exclusions for any services.

How to Find a Dentist

The easiest way to find a participating dentist near you is to visit our website at www.dentaquestdental.com. From there you will find a complete, up-to-date listing of general dentists, orthodontists, and other specialists.

Identification Cards

Two identification cards from DentaQuest will be mailed to your home shortly after your enrollment. Both cards are issued in the subscriber's name, but can be used by everyone covered under your plan.

Claims Process for in-network dentists

- Present your ID card to the dentist at the time of your visit.
- The dentist will submit your claim to DentaQuest.
- If your services are not fully covered, DentaQuest will send you an Explanation of Benefits (EOB) detailing what DentaQuest paid the dentist under your plan's coverage and the remaining patient balance, which you pay directly to the dentist.
- You are responsible for any co-payments and deductibles.

Coverage for out-of-network services

Your plan covers services performed by out-of-network dentists. Coverage is only available for those services covered by your PPO plan. Out-of-network coverage is usually less than the coverage provided for in-network benefits, which means higher out of pocket costs for you. You'll also be responsible for paying any difference, if there is any, between what DentaQuest pays and the dentist's total submitted charge for the service. You'll enjoy the greatest value from your dental plan when you receive services from your PPO participating dentists.

DID YOU KNOW?

There are two dental diseases: caries (cavities) and periodontal disease (gum disease). They are both 100% preventable and often present without symptoms. Test your oral health IQ with our quiz at http://www.dentaquestdental.com/pdfs/oralhealthliterature/DQ153_Happy_Mouths_Buckslip_10.07.pdf

Claims process for out-of-network dentists

- Present your ID card to the dentist at the time of your visit.
- Your dentist may collect his/her fees directly from you.
- DentaQuest will reimburse you directly based on a claim form that you submit. Please submit all claim forms to: DentaQuest, P.O. Box 9708, Boston, MA 02114. Although your dentist may be willing to prepare and submit the claim form for you, DentaQuest will send its payment directly to you.

Additional Claims Info

- All Claims must be submitted within 90 days from the date of service.
- Ask your dentist to submit a "pre-treatment estimate" to DentaQuest for any procedure that exceeds \$500. This will enable us to help you estimate any out-of-pocket expenses you may incur.
- Under your plan's subrogation clause, you may be required to reimburse DentaQuest for claim payments if you also receive payment from a third party who is held liable for an injury that requires dental care.

Coordination of Benefits

If your family is covered by more than one dental plan (or a medical plan that offers dental coverage), DentaQuest will coordinate benefits with the other carrier. In determining coverage, total payments from both carriers cannot exceed the allowable charge for service. If you have a question about Coordination of Benefits (COB), please contact our Customer Service Department at 1-800-334-6277.

The information on this coverage summary should be used only as a guideline for your dental benefits plan. For detailed information on your group's plan, riders, terms and conditions, or limitations and exclusions, refer to your plan's Subscriber Certificate, which is available through your benefits administrator.

If you receive treatment that is not covered under your plan, you may be billed at the dentist's usual fee rather than DentaQuest's negotiated fee. The same is true if you continue to receive services once you have reached your annual maximum.

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