



Voluntary Dental Plan

You have two dental plan options available with Cigna: the PPO plan with a \$1,250 annual maximum and the Dental HMO plan with no copays or annual maximums. Your contribution for dental coverage during 2020 will reflect the option you choose and the family members you cover.

Preventive and diagnostic services are encouraged in order to avoid the development of more serious and costly conditions. Therefore, the plan pays benefits for covered preventive and diagnostic services with no need for you to pay a deductible (whether services are obtained in-network or out-of-network).

Note: You may elect dental coverage for 2020 whether or not you elect medical coverage.

	DHMO PLAN (ONLY AVAILABLE IN CERTAIN STATES)	DPPO PLAN
	IN-NETWORK ONLY	IN-NETWORK
Calendar Year Deductible		
Individual	\$0	\$75
Family	\$0	\$225
Calendar Year Maximum Benefit		
Per Individual	Unlimited	\$1250 per individual (Preventive, Basic and Major Services combined)
	You Pay	You Pay
Preventive Care		
Exams, Cleanings, X-rays, Fluoride Treatments	\$0	\$0
Basic Services		
Fillings, Space Maintainers, Sealants, Extractions, Oral Surgery, Endodontics, Periodontics, Emergency Exams	Various copays apply. Refer to Patient Charge Schedule	20%*
Major Procedures		
Crowns, Inlays/Onlays, Dentures and Bridgework, Repairs	Various copays apply. Refer to Patient Charge Schedule	50%*
Orthodontia		
24-Month Treatment Fee — Additional fees will apply for pre-ortho visits and treatment, records and retention, and banding		
Adults	Various copays apply. Refer to Patient Charge Schedule	Not covered
Children (up to 19th birthday)		50% up to a lifetime maximum benefit of \$1,250 per individual; deductible waived

*After deductible