

TRADITIONAL PLUS DENTAL COVERAGE BENEFIT OPTIONS

PLAN	CLASS I SERVICES	CLASS II SERVICES	CLASS III SERVICES	CLASS IV SERVICES	DOLLAR MAXIMUM	
	In-Network % Co-Pay	In-Network % Co-Pay	In-Network % Co-Pay	In-Network % Co-Pay	Annual Class I, II AND III	Lifetime Class IV
One	50%	50%	50%	Not Covered	\$800	N/A
Two	0%	25%	50%	Not covered	\$1000	N/A
Three	0%	25%	50%	Covered 50%	\$1000	\$1000
Four	0%	Not Covered	Not Covered	Not Covered	\$1000	N/A
Five	0%	25% *	50% *	Not Covered	\$1000	N/A

NOTE: Definitions of services outlined on Benefits-at-a-Glance.

* Plan Five has \$50/member, \$100/family deductible for Class II & III services.

TRADITIONAL PLUS DENTAL PLAN

Utilizes a PPO type network of DenteMax dentists that promote preventative dental care.

By using a network dentist member co-pays will usually be lower.

NOTE: This is only a broad overview of the covered benefits. Please refer to a plan certificate for more precise coverage information.

