

Dentegra is leading the charge to redefine the dental insurance industry...

making quality dental care affordable and accessible to more people, and the quick and easy choice for you.

Dentegra® Dental PPO

Family Basic Plan

At Dentegra Insurance Company (Dentegra), we believe your smile is unlike any other (and that's a good thing!). That's why we're focused on providing dental coverage that's affordable and simple to use. It's all the good stuff — plus a first-rate network of dentists. This brochure contains an overview of our PPO plan benefits and information about Dentegra. You can also learn more about our company by visiting us at dentegra.com.

Our plans

With Dentegra, you get more than just great dental benefits. Dentegra contracts with a top-notch network of dentists who can save you money when compared to an out-of-network dentist. We've designed dental benefits plans that are easy to understand and use — so you can spend less time managing your dental plan and more time enjoying your life. Our PPO plans:

- Focus on preventive care at affordable costs
- Provide simple and secure online services for benefits, eligibility, dentist directories and more
- Provide opportunities to save on claims when enrollees visit a Dentegra dentist

How it works

Dentegra PPO plans are simple to use. A PPO plan pays a percentage of your dental costs for covered services — you are responsible for the remaining percentage, commonly called "coinsurance." While we recommend you visit a Dentegra PPO dentist for the savings and quality our network offers, our plan gives you the freedom to visit any licensed dentist, anywhere, anytime. Here are some of the key plan features:

- Most plans require you to satisfy a plan deductible. After that, Dentegra pays the percentage of charges outlined in the list of your benefits.*
- * For adult benefits, once the plan maximum is reached, you will be responsible for all charges.

Dentegra Insurance Company 100 First Street San Francisco, CA 94105 Customer Service Phone: 800-503-4161 dentegra.com **Claims** P.O. Box 1850 Alpharetta, GA 30023-1850

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- Most diagnostic and preventive services such as checkups and cleanings are covered at 100%.
- You will usually pay less when you visit a Dentegra dentist because our contracted dentists agree to accept lower fees for Dentegra patients. (You can also see any dentist, although non-network dentist charges may be higher.)
- For pediatric (children's) coverage, our plans pay 100% for covered services after you have reached the out-of-pocket maximum, and there is no cap on the annual maximum the plan will pay.
- Our plans make it easy for children and adults to have a healthy smile by covering important preventive and basic care such as checkups, cleanings, x-rays and fillings.

Submitting a claim

- Claims are no problem with a Dentegra plan. When you visit a Dentegra dentist, you pay only your portion for services. Our network dentists will file claim forms for you and receive payment directly from us.
- Visiting a non-Dentegra dentist? You or your dentist can just submit your claim to the claims address on your ID card and in this brochure.
- After your claim has been processed, you will receive a dental benefits statement from Dentegra that lists the services provided, the costs of the dental treatment and the amount you owe your dentist.

Online services

Wherever you are — work, home or on the go — you can access your benefits and eligibility, find a dentist, print ID cards and manage your claims. Our online tools are also a snap to use on your mobile device, so we're there when you need us.

Our company

Dentegra was created to meet the needs of a consumer-oriented health insurance marketplace, through technology, innovation and collaboration. We're all about simple, affordable, quality insurance with a variety of plan choices so that you can choose the option that best fits your lifestyle.

This benefit information is only a summary and not intended or designed to replace or serve as the plan Policy. Please consult the Policy for a complete description of plan benefits, limitations and exclusions. In the event of any inconsistency between this document and the Policy, the terms of the Policy will prevail. To view a copy of the Policy, <u>click here</u> or call 800-503-4161.

Smile. Your pearly whites are in good hands.

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Family Basic Plan

Plan Highlights		Pediatric Benefits (up to age 19)		Adult Benefits (age 19 and older)	
Deductibles & Maximums per Calendar Ye	ear				
Deductible	Enrollee	\$55 per pediatric enrollee None		\$50	
	Family			\$150	
Deductible Waived Deductible does not apply to these services		n/a		n/a	
Annual Maximum Maximum the plan will pay each year for services per person		None		\$1,000	
Out-of-Pocket Maximum After this amount is reached, the plan pays 100% of the remaining covered services for that year. Applies only to in-network services		\$350 one pediatric enrollee/ \$700 two or more pediatric enrollees		n/a	
Covered Services*		Dentegra pays	Enrollee pays	Dentegra pays	Enrollee pays
Diagnostic and Preventive Services		100%	0%	100%	0%
Basic Services		50%	50%	50%	50%
Major Services		50%	50%	Not a Benefit	Not a Benefit
Orthodontics Medically Necessary		50%	50%	Not a Benefit	Not a Benefit
Waiting Period(s) Orthodontics	Pediatric	12 months		n/a	
	Family	n/a		None	

* Limitations or waiting periods may apply for some benefits; some services may be excluded from your plan. Reimbursement to dentists is based on contracted fees for all dental providers.