

Dentegra® Dental PPO

for Small Businesses Family Basic Plan

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.

At Dentegra Insurance Company, 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 Insurance Company (Dentegra), you get more than just great dental benefits. Dentegra contracts with a top-notch network of dentists who can save your employees money when compared to an out-of-network dentist. And because we know your time is precious, we offer dental benefits that are easy to understand and use. Our PPO plans:

- Focus on preventive care at affordable costs
- Provide simple and secure online services for benefits, eligibility, dentist directory and more
- Can help enrollees save on costs when they visit a Dentegra dentist

How it works

Dentegra PPO plans are simple to use. A PPO plan pays a percentage of enrollees' dental costs for covered services — they are responsible for the remaining percentage, called coinsurance, plus any deductible and amount over plan maximums (for adults) and for non-covered services. Although we encourage enrollees to visit a Dentegra PPO dentist for the savings and quality our network offers, our plan gives them freedom to visit any licensed dentist, anywhere, anytime. Here are some key plan features:

- Most plans require the enrollee to first satisfy a deductible. After that, Dentegra pays the percentage of charges outlined in the list of benefits.*
- Most diagnostic and preventive services such as checkups and cleanings are covered at 100%.
- Enrollees usually pay less when they visit a Dentegra dentist because our contracted dentists agree to accept lower fees. (Enrollees can, however, see any dentist, although non-network dentist charges may be higher.)

* For adult benefits, once the plan maximum is reached, all charges are the responsibility of the patient.



Dentegra Insurance Company
100 First Street
San Francisco CA 94105

Customer Service
Phone: 800-503-4161

Claims
P.O. Box 1850
Alpharetta, GA 30023-1850

dentegra.com

- For pediatric (children's) coverage, our plans pay 100% of covered services after the enrollee out-of-pocket maximum is reached and the deductible is satisfied. There is no cap on the annual amount the plan will pay for covered services.
- Our plans make it easy for both adults and children by covering important preventive and basic care such as checkups, cleanings, x-rays and fillings.

Submitting a claim

- **Claims are no problem with Dentegra.** When services are provided by a Dentegra dentist, enrollees pay only their portion for treatment. Our network dentists agree to file all claim forms and receive payment directly from us.
- **For enrollees who choose to visit an out-of-network dentist,** the enrollee may need to submit the claim.
- **Dentegra provides a dental benefits statement** after the claim has been processed that lists the services provided, the costs of the dental treatment and the amount of any fees owed to the dentist.

Online services

Dentegra's online services — simplicity is in the details. Wherever you are — work, home or on the go — you and your employees can manage your account with such time-saving features as viewing eligibility, benefits and claims or locating a network dentist. Our online tools are also a snap to use on a mobile device, so we're there for you when you need us.

Our company

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 needs.

This benefit information is only a summary and not intended or designed to replace or serve as the plan's Group Contract. Please consult the Evidence of Coverage for a complete description of plan benefits, limitations and exclusions. In the event of any inconsistency between this document and the Evidence of Coverage, the terms of the Evidence of Coverage will prevail. To view a copy of the Evidence of Coverage, visit dentegra.com/xxxx, or call 800-503-4161.

Smile. Your pearly whites are in good hands.

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Plan Highlights

Plan Highlights	Pediatric Benefits (up to age 21)		Adult Benefits (age 21 and older)	
Deductibles & Maximums per Contract Year				
Deductible				
	Enrollee	\$90 per pediatric enrollee		\$50
	Family	None		\$150
Deductible Waived <i>Deductible does not apply to these services</i>		n/a		n/a
Annual Maximum <i>Maximum the plan will pay each year for services per person</i>		None		\$1,000
Out-of-Pocket Maximum <i>After this amount is reached, the plan pays 100% of the remaining covered services for that year. Applies only to in-network services</i>		\$350 one pediatric enrollee/ \$700 two or more pediatric enrollees		n/a
Covered Services*		<i>Dentegra pays</i>	<i>Enrollee pays</i>	<i>Dentegra pays</i>
				<i>Enrollee pays</i>
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)				
	Pediatric	None		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.