

Two Star Plan Summary



Deductible Waived	Calendar Year Deductible Choose • \$25, \$50 or \$100 per person • 3xFamily		No Deductible
Type 1 Preventive 100%	Type 2 Basic 80%	Type 3 Major 50%	Orthodontia Option 50%
<ul style="list-style-type: none"> • Periodic routine exams • Diagnostic services such as full-mouth series, bitewings, panoramic X-rays • Prophylaxis (cleanings) • Fluoride to age 19 • Space maintainers • Sealants 	<ul style="list-style-type: none"> • Exams other than routine • Periapical X-rays • Minor restorative services such as amalgam and composite fillings, recementation • Oral surgery, Biopsy • General anesthesia 	<ul style="list-style-type: none"> • Restorative services such as inlays/onlays, crowns, posts • Prosthodontic services such as bridges, dentures, repairs • Endodontics • Periodontics 	<ul style="list-style-type: none"> • Child-Only Ortho 5+ lives • Adult Ortho 10+ lives
Calendar Year Maximum Choose • \$750, \$1000, \$1500 or \$2000 (\$2,000 max only available for groups of 10+) Out-of-network claim allowance is 80th U&C. (90th U&C is available.)			Lifetime Maximum \$1,000 \$1,500 available for groups of 10+

Waiting Periods for Virgin Coverage

	<35 enrolled	35+ enrolled
Type 1 & 2 (Preventive & Basic)	None	None
Type 3 (Major)	12 months	None
Orthodontia	12 months	None

Waiting Periods for Takeover Plans

- To qualify as a takeover, a group must have had prior coverage for 12 full months including coverage for Type 3 Major services.
- To qualify for orthodontia takeover, a group must have had prior coverage for orthodontia for 12 months.
- A group that qualifies for takeover will have no waiting periods for current employees and future employees. All future employees must enroll within 31 days of eligibility or late entrant rules will apply.

Evidence of Prior Coverage:

- Certificate with Schedule of Benefits and list of waiting (or elimination) periods, or a Dental HMO plan summary and fee schedule.
- The most current prior carrier's bill. Prior insurance must be continuous with no gap in coverage.
- Documentation showing the effective date of the prior plan, i.e., copy of original Master Application, or dated Insurance Certificate.