

PPO 196 PLAN	Participating Dentists Plan Pays	Non-Participating Dentists Plan Pays																
Preventive Services <ul style="list-style-type: none"> • Oral examinations • X-rays • Cleaning • Topical fluoride treatment (through age 14) • Sealants (through age 14) 	100%	100% after deductible (option to waive deductible available)																
Basic Services <ul style="list-style-type: none"> • Space maintainers (through age 14) • Emergency exams and palliative care for pain relief • Oral surgery • Amalgam, composite fillings • Thumb sucking and harmful habit appliances (through age 14) • Extractions (routine) • Non-cast prefabricated stainless steel crowns • Partial or complete denture repairs/adjustments 	90% after deductible	80% after deductible																
Major Services <ul style="list-style-type: none"> • Periodontics* • Endodontics (root canals)* • Crowns • Inlays and onlays • Removable or fixed bridgework • Partial or complete dentures • Denture relines/rebases 	60% after deductible	50% after deductible																
Calendar-year Deductible Options (select one of the three options)	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Individual</th> <th style="text-align: left;">Family</th> </tr> </thead> <tbody> <tr> <td>• \$25</td> <td>\$75</td> </tr> <tr> <td>• \$50</td> <td>\$150</td> </tr> <tr> <td>• \$50</td> <td>\$150</td> </tr> </tbody> </table>	Individual	Family	• \$25	\$75	• \$50	\$150	• \$50	\$150	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Individual</th> <th style="text-align: left;">Family</th> </tr> </thead> <tbody> <tr> <td>\$50</td> <td>\$150</td> </tr> <tr> <td>\$50</td> <td>\$150</td> </tr> <tr> <td>\$100</td> <td>\$300</td> </tr> </tbody> </table>	Individual	Family	\$50	\$150	\$50	\$150	\$100	\$300
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Annual Maximum Options (excludes orthodontia services)	\$1,000, \$1,500, \$2,000, or \$2,500																	
Orthodontia Options <ul style="list-style-type: none"> • Child Orthodontia—covers children through age 18. Available for 10+ groups at an additional cost. • Adult/Child Orthodontia—covers adults and children. Available for 25+ groups at an additional cost. 	50% no deductible																	
Lifetime Orthodontia Maximum (amount must be less than or equal to the annual maximum)	\$1,000, \$1,500, or \$2,000																	

* Periodontics and endodontics are available as a basic service for an additional cost. (Must be covered at the same service level.)
 Note: Waiting periods may apply.

You choose and save

Our PPO plan combines the freedom to choose your dentist with the cost-savings advantage of network participation. You'll receive the greatest benefit from your plan when you visit a HumanaDental participating dentist. You may still visit a non-participating dentist, but your out-of-pocket expenses may be greater than if you visited a participating dentist.

HumanaDental participating dentists

When you visit a participating dentist, you save money. Always confirm your dentist's participation with HumanaDental. That way, you are sure to save.

Where to find your participating dentist

To help you select a HumanaDental participating dentist, simply use the:

- **Internet.** Log on to our web site at www.humanadental.com/dentistfinder and search for a dentist in your area.
- **Phone.** Call HumanaDental, at 1.800.233.4013, and ask a customer service representative for a dentist in your area.

Time-honored customer service

We are here to help. Our representatives are available from 8 a.m. to 6 p.m. Monday through Friday (hours apply to all time zones), and voicemail capabilities are available 24 hours a day.

One easy phone number, call **1.800.233.4013** for:

- Choosing your participating dentist.
- Customer service.
- Benefit information.
- General questions.

TDD: 1.800.325.2025

Humanadental.com

Register on humanadental.com secured web site to access your dental insurance information, such as:

- Verify plan benefits, eligibility, and certificate.
- View claim status and claim history.
- Search for participating dentists and print a map to your dentist's location.
- Get answers to questions specific to your plan.
- Replace a lost ID card.

Understanding your plan is simple

Strong partnerships, even stronger networks

Because HumanaDental's participating dentists are located across the United States, you may access a participating dentist near your hometown, your workplace, or even when you're away on vacation. Plus, your covered dependents can visit a participating dentist even if they're away at college.

Certificate of Insurance

Once you've enrolled in the HumanaDental plan, you will receive a packet of information containing your *Certificate of Insurance*. Your *Certificate of Insurance* is your official dental insurance document. It contains information on covered services, deductibles, and waiting periods.

Waiting periods

You're immediately eligible for many services—such as cleanings, exams and other treatments. However, your plan may require a 12-month waiting period for some services. Refer to your *Schedule of Benefits* in your *Certificate of Insurance*.

ID cards

As a HumanaDental member, you'll receive a personal ID card. It provides all the information your dentist needs to submit your claims. Simply present your ID card at the dentist office for fast, convenient, and hassle-free service.

Explanation of Benefits

Once your dental claim is processed, you'll receive an explanation of benefits (EOB) in the mail. An EOB provides detailed information on covered dental services; amounts paid; plus, any additional amount you may owe your dentist.

Pre-treatment plans

When services are expected to exceed \$300, a pre-treatment plan—a detailed description of coverage—is recommended. Ask your dentist to call HumanaDental for a complete dental pre-treatment plan. Pre-treatment plans may be necessary on services like crowns, bridges, inlays, and periodontics. Remember: A pre-treatment plan is an estimate, not a guarantee, of what your HumanaDental plan will cover.

Prior carrier credit

HumanaDental will credit a member's deductible amount that was satisfied with the employer's previous dental carrier. The deductible credit will be applied to the member's new HumanaDental plan (credit must be within the same calendar year). Simply send HumanaDental a letter or explanation of benefits from the employer's previous carrier within 60 days of the HumanaDental coverage effective date.

Covered dependent children

Covered dependent children are eligible for coverage through age 18. If your covered dependent child is a regular, full-time student, your child is eligible for coverage through age 24.

This is not a complete disclosure of plan qualifications and limitations. Specific limitations and exclusions as contained in the Regulatory and Technical Information Guide will be provided to you by your agent. Please review this information before applying for coverage. The amount of benefits provided depends upon the plan selected. Premiums will vary according to the selection made.



**HUMANA
DENTAL**

Insured by HumanaDental Insurance Company

Policy number: CA-70090-HD
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CA-50044-HD 7/02