Compare Your Dental Plan Options

Effective January 1, 2024

Medical Benefits	Premier Dental Care Plan ¹	Choice Dental Care Plan ¹	Cigna Dental Care [®] DHMO Plan ³
Providers	May use any provider or save with network providers	May use any provider or save with network providers	Must use only providers in the network
Deductible (per person, per year) ²	\$50	\$50	No deductible
In-network annual maximum benefit (per person)	\$1,500	\$1,200	No annual maximum
Out-of-network annual maximum benefit (per person)	\$1,200	\$1,000	No annual maximum
Preventive services	0%	10%	\$5 office visit co-pay + applicable fee (if any) ³
Routine oral examinations — two per calendar year	0%	10%	No charge
Routine dental cleanings — two per calendar year	0%	10%	No charge
Bitewing X-rays — once every 12 months	0%	10%	No charge (No annual limit)
Fluoride treatments — two per calendar year	0%	10%	No charge
Basic restorative care	20%	30%	\$5 office visit co-pay + applicable fee (if any) ³
Panoramic X-ray - Once every 60 months	20%	30%	No charge
New fillings/replacement fillings	20%	30%	\$17-\$35 for simple fillings; \$22-\$115 for composite fillings
Simple extractions	20%	30%	\$53
Major restorative care	50%	50%	\$5 office visit co-pay + applicable fee (if any) ³
Endodontic treatment (root canal)	50%	50%	\$38-\$675
Dentures	50%	50%	\$430-\$670
Crowns	50%	50%	\$105-\$515
Implants	50%	50%	\$770-\$970
Orthodontic services	50% with a lifetime maximum benefit of \$1,000	50% with a lifetime maximum benefit of \$1,000	\$5 office visit co-pay + applicable fee (24-month limitation)
Monthly Rates			
Employee Only	\$39.93	\$29.51	\$22.80
Employee + Spouse	\$79.86	\$59.02	\$38.53
Employee + Child(ren)	\$99.83	\$73.78	\$53.81
Employee + Family	\$139.76	\$103.29	\$63.38

¹Coverage percentages based on reasonable and customary charges.

²Deductibles apply to basic and major services for the Premier Dental Care and Choice Dental Care plans.

³Fees based on the <u>Cigna Dental Care (DHMO) Patient Charge Schedule (W1-V9)</u>. The Cigna DHMO provider network is the Cigna Dental Care Access Plus Network.

The Cigna DHMO is not available in the following states: AK, ME, MT, NH, NM, ND, SD, VT, and WY.



Giving You Dental Plans to Smile About

Quality dental care is an important part of safeguarding overall health and well-being. Research has linked gum disease to complications with heart disease, stroke, diabetes, preterm birth and other health issues. Including dental coverage in your health care package can help you and your family stay healthier longer.

Eligibility

A full-time employee, spouse and dependents under age 26 are eligible for coverage.

Premier Dental Care and Choice Dental Care Plans

The Premier Dental Care and Choice Dental Care plans allow you and your family the freedom to see any dentist or use dentists in a dental Preferred Provider Organization (PPO) network for added savings. PPO dentists offer services at reduced, contracted fees that can help control your out-of-pocket costs and stretch your annual maximum expenses benefit.

Cigna Dental Care DHMO Plan

The Cigna DHMO provider network is the Cigna Dental Care Access Plus Network. There are now more than 31,000 dentists in 40+ states, and growing. One of every five dentists is in both the Cigna DPPO and Cigna Dental Care Plus networks. It has a lower monthly premium with predictable costs based on the Patient Charge Schedule. The Cigna Dental Care DHMO plan requires that you select a primary care provider or dental office in the Cigna Dental Care Plus network to receive benefits.

Locating a Provider

To find a PPO or DHMO dental network provider in your area, call 1-800-CIGNA24 or visit *Cigna.com*.

Cigna Healthy Rewards®

To help you improve your health from head to toe, Cigna's Healthy Rewards discount program is included at no additional cost. With Healthy Rewards, you get discounts on a wide range of health and wellness products and programs including massage therapy, acupuncture, vision care, smoking cessation programs, fitness club memberships and much more! (Available to enrolled participants and enrolled dependents only. Not all programs and benefits are available in all states.) To get more information, visit *My.Cigna.com*.

Benefit Adjustments

Benefit will be coordinated with any other dental coverage. Under the Alternate Benefit provision, benefit will be payable for the most economical services or supplies meeting broadly accepted standards of dental care. If the cost of a proposed treatment plan exceeds \$300, it should be submitted for an estimate of benefit payable.

These dental products are administered by Cigna Health and Life Insurance Company through GuideStone Financial Resources' benefits program.

This is a brief description only. It is not a *Certificate of Creditable Coverage*. The group policy alone determines all rights, benefits and applicable limitations and exclusions. Cigna Dental and the policyholder have the option to cancel the group policy.