

Dental Care Benefits

Plan Details: PPO Dental

Through Liberty Dental, we offer preventative and comprehensive coverage to meet your unique needs.

The charts below show the covered benefits and amounts we pay.

Benefits	Comprehensive Plan (DPPO2N15)	
	In network	Out-of-Network
Annual Deductible	\$0	
Annual Maximum*	\$1,500	
Diagnostic and Preventive Services*: Cleanings, Exams and X-rays	100%	80%
Basic Services		
Fillings	80%	60%
Other Minor Services		
Simple Extractions		
Major Services		
Oral Surgery	50%	50%
Endodontics		
Periodontics		
Prosthodontics/Crowns		

 $^{^{\}ast}$ Preventative and diagnostic services do not apply to plan maximum.