



## Employee Benefits - Dental Plan Summary

Effective 7/1/19 - This Document is a summary of coverage only. The MMIA Employee Benefits Program Plan Documents are available at [www.mmiaeb.net](http://www.mmiaeb.net) and must be referenced for details of all coverages.

	Basic Dental Plan	Orthodontic Enhancement*
Deductible (Individual/Family) (January 1 - December 31)	\$25 / \$50	\$2,000 Lifetime Benefit/Individual  Plan pays 50% after Deductible
Calendar Year Maximum Benefit (the most the Plan will pay for covered services in a plan year)	\$2,000 / Individual	
<b>Dental Services</b>		
Diagnostic & Preventive (cleanings and screenings)	<ul style="list-style-type: none"> <li>Plan pays 100%</li> <li>Deductible waived</li> <li>Does not apply to Calendar Year Maximum Benefit</li> </ul>	
Basic Restorations	Plan pays 80% after Deductible	
Major Restorations and Implants	Plan pays 50% after Deductible	

<b>Dental Plan Cost</b>	<b>Basic Dental Plan</b>	<b>*With Ortho Enhancement</b>
<i>Participant Only</i>	\$33	\$34
<i>Participant &amp; Spouse</i>	\$66	\$68
<i>Participant &amp; Child(ren)</i>	\$58	\$66
<i>Participant, Spouse &amp; Child(ren)</i>	\$92	\$104