

Standard Dental

Outline

Dental plan with preventive, basic, major and orthodontic coverage tiers. Plan features no waiting periods and flexibility.

Coverage Tiers

| Coverage Tier | In Network | Out of Network |
|---------------|------------|----------------|
| Preventive | 100% | 50% |
| Basic | 80% | 40% |
| Major | 50% | 25% |
| Orthodontic | 25% | 25% |

Annual Limit

Plan will pay up to \$2,000 per year, per member. All coverage tiers are included in annual limits.

Deductible

Calendar year deductible of \$50 per member, \$150 for the family. Deductible applies to basic and major services and not preventive.

Orthodontics

Plan pays 25% of orthodontic services up to a \$1,000 lifetime limit per member.

Network

Plan provides access to the Connection Dental® national PPO network of dental providers. You can search for a provider at www.ppousa.com or call 800-513-7177.