

BENEFIT SUMMARY

DENTAQUEST® PERSONAL DENTAL PREVENTIVE PLAN

DentaQuest: More Choices, More Value

Everyone deserves quality, affordable oral health care. All DentaQuest plans cover preventive care at no cost to members. That's just one reason why more than 30 million people trust their care to DentaQuest. The coverage summary shown below provides detailed information on your DentaQuest Personal Dental plan.

PPO plans are available in the following states: AZ, GA, IL, MO, OH, TX & VA with out-of-network coverage.

EPO Plans are sold in FL, IN, LA, PA & TN with no out-of-network coverage.

Coverage Summary

| Coverage type | Calendar year deductible | DentaQuest will pay* |
|--------------------------------------|--|-----------------------|
| Diagnostic and preventive services | None | 100% |
| Restorative and other basic services | \$50 per covered individual / \$150 per family | 50% |
| Complex dental services | Not a covered service | Not a covered benefit |
| Orthodontics (under age 19) | Not a covered service | Not a covered benefit |

What is the waiting period for services?

There are never waiting periods for preventive or diagnostic services. Restorative services are subject to a 6-month waiting period.

Is there out-of-network coverage?

In AZ, GA, IL, MO, OH, TX and VA: **YES**. DentaQuest will pay the same percentage for covered services received in and out of network. But if the member chooses to see a non-contracting dentist (out of network), they will be responsible for the difference between the plan's allowable charges (what contracting dentists receive for payment from DentaQuest) and the dentist's usual and customary fees (what the dentist charges cash-paying patients). This means the member saves more by receiving care from a contracting dentist.

In FL, IN, LA, PA and TN: **NO**. If a member visits a dentist who is not in our network, they will be responsible for the entire cost of the services they receive. Members may only receive covered benefits from a non-participating dentist in the event of an emergency dental condition.

What are the annual limits and maximums?

For covered individuals, the benefits are not limited to a maximum dollar payment for covered services shown in the schedule of benefits.

Are dependents covered?

Yes, dependent children are covered up to and including age 26.

| Category / Procedure | Benefit limits | DentaQuest will pay* |
|-------------------------------------|--|----------------------|
| Diagnostic | | |
| Initial oral exam | Once per dentist per 60 months | 100% |
| Periodic oral exam | Twice per plan year | 100% |
| Full mouth X-rays | Once every 60 months | 100% |
| Bitewing X-rays | Twice per plan year | 100% |
| Single tooth X-rays | As needed | 100% |
| Preventive | | |
| Routine cleaning | Twice per plan year | 100% |
| Fluoride varnish application | Children under 19 – Twice per plan year | 100% |
| Topical fluoride treatment | Children under 19 – Twice per plan year | 100% |
| Space maintainers | Only for children under age 14 and not for the replacement of primary or permanent front teeth | 100% |
| Sealants | Sealants on unrestored permanent molars, once per tooth for children under 16 | 100% |
| Repair crowns or onlays | Once per tooth | 50% |
| Recement crowns | Once per tooth every 12 months | 50% |
| Restorative | | |
| Silver fillings | Once every two years per surface per tooth | 50% |
| White fillings (front teeth) | Once every two years per surface per tooth | 50% |
| Temporary fillings | Once per tooth | 50% |
| Stainless steel crowns | Under age 15 – One per tooth in 60 months | 50% |
| Dentures and Bridges | | |
| Rebase or reline dentures | Once every 36 months | 50% |
| Repair of dentures or fixed bridges | Once every 12 months | 50% |
| Adding teeth to existing dentures | Once per tooth | 50% |
| Recementing fixed bridges | Once every 12 months | 50% |
| Oral Surgery | | |
| Simple extractions | Once per tooth | 50% |
| Emergency Dental Care | | |
| Minor treatment – pain relief | Three occurrences in six months | 50% |
| Anesthesia | | |
| General anesthesia | Allowed with covered surgical services only | 50% |

The information on this coverage summary should be used only as a guideline for your dental benefits plan. For detailed information on your plan, riders, terms and conditions, or limitations and exclusions, refer to your plan's Individual Dental Plan Policy, which is available at www.dentaquest.com/personal. If you receive a treatment after you have exhausted your maximum or if you receive a treatment that will cause you to exceed your maximum, you may be billed at the dentist's normal rate rather than DentaQuest's negotiated rate.

Your Plan is administered by
DentaQuest National Insurance Company, Inc.

DentaQuest.com

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DentaQuest
a Sun Life company