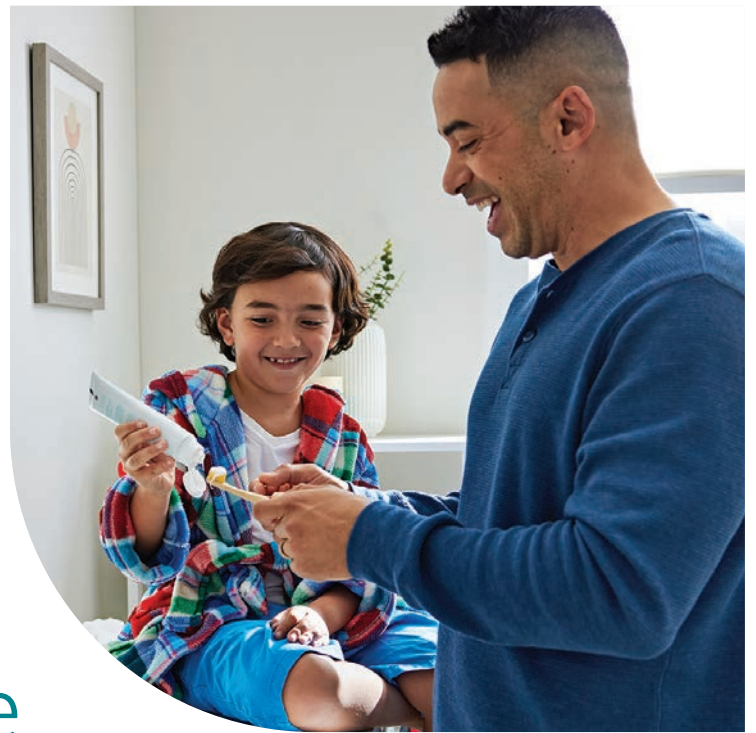




Our dental plans will make you smile

At Humana we want to help take care of you. Dental health is an important part of your overall well-being and Humana's dental benefits help make it easy to make your dental care a priority. When you sign up for a Humana dental plan, you're signing up for a healthier you.

Why sign up for dental benefits?



Preventive dental care, such as checkups and cleanings, help stop issues before they start, saving you time and money in the long run. And when you use an in-network dentist, **preventive care is at no additional cost to you.**



For years, doctors have recognized the link between oral health and whole-body health. **Routine teeth cleanings can help reduce your risk for heart disease, stroke and dementia.**



Plus, **caring for you is at the heart of everything we do,** so we make it easy for you to get the help you need – when you need it. Our service teams are always ready to help and answer your questions.



Welcome to Humana

At Humana, we want to help take care of you — with benefits that make it easy for you to get the care you need, when you need it. With plan options designed to support your overall well-being, your care is always at the core of what we do.





Services	In-network dentist Network: PPO/Traditional Preferred		Out-of-network dentist INFS	
Deductible (excludes orthodontia services)	Individual: \$50	Family: \$150	Individual: \$50	Family: \$150
Deductible applies to all services excluding preventive services.				
Annual maximum (excludes orthodontia services)	Unlimited			
Preventive services Routine oral examinations (3 per year) Bitewing x-rays (one set of films per year under age 10 and four films per year age 10 and older) Panoramic x-rays (1 per 5 years combined frequency with full mouth x-rays; ages 6+) Full mouth x-rays (1 per 5 years, combined frequency with panoramic x-rays; ages 12+) Routine cleanings (3 per year) Periodontal cleanings (4 per year) Fluoride treatment (1 per year, through age 16) Sealants (permanent molars, through age 16) Space maintainers (primary teeth, through age 15) Oral Cancer Screening (1 per year, ages 40 and older)	100% no deductible		100% no deductible	
Basic services Emergency care for pain relief Amalgam fillings (1 per tooth every 2 years, composite for anterior/front teeth) Composite fillings (1 per tooth every 2 years, molar teeth) Oral surgery (including extractions of impacted teeth) General anesthesia ¹ Stainless steel crowns Harmful habit appliances for children (1 per lifetime, through age 14) Periodontics (scaling/root planing and surgery 1 per quadrant every 3 years)	80% after deductible		80% after deductible	

¹ Only covered in conjunction with covered oral surgical procedures. Other restrictions may apply.



Services	In-network dentist Network: PPO/Traditional Preferred	Out-of-network dentist INFS
Endodontics (root canals 1 per tooth per lifetime and 1 re-treatment)		
Major services Crowns (1 per tooth every 5 years) Inlays/onlays (1 per tooth every 5 years) Bridges (1 every 5 years) Dentures (1 every 5 years) Denture relines/rebases (1 every 3 years, following 6 months of denture use) Denture repair and adjustments (following 6 months of denture use) Implants (crowns, bridges, and dentures each limited to 1 per tooth every five years)	50% after deductible	50% after deductible

Orthodontia services Adult/Child orthodontia - Plan pays 50 percent (no deductible) of the covered orthodontia services, up to: \$1,000 lifetime orthodontia maximum.

If a member uses services rendered by providers with whom we have agreements, the fee or maximum allowable charge that we have negotiated with that provider will apply; if a member uses services rendered by a provider with whom we do not have agreements, coinsurance will apply to the maximum allowable charge. Out of network dentists may bill members for charges above the amount covered by the dental plan.

Waiting periods

Enrollment type ²	Group size	Preventive	Basic	Major ³	Orthodontia
Employer sponsored initial enrollment, open enrollment, and timely add-on	2-4 enrolled employees	No	No	12 months ⁴	24 months ⁴
Employer sponsored initial enrollment, open enrollment, and timely add-on	5 or more enrolled employees	No	No	No	No
Voluntary initial enrollment, open enrollment, and timely add-on	2-9 enrolled employees	No	No	12 months ⁴	24 months ⁴
Voluntary initial enrollment, open enrollment, and timely add-on	10 or more enrolled employees	No	No	No	12 months ⁴

² Late applicant enrollment will have the following waiting periods: 12 months basic & major services, 12 months orthodontia (24 months for 2-9 enrolled employees.)

³ Waiting periods do not apply to endodontic services unless a late applicant.

⁴ Waiting periods may be decreased or waived based on the number of months the member had dental insurance immediately before their effective date. Members must have prior orthodontic insurance to reduce or waive the orthodontic waiting period.