



This is a Dental Insurance Policy underwritten by Companion Life Insurance Company

Modified Dental Select Plan

Region: 907  
Rates Effective: 1-1-2022

<b>McDowell Tech Community College</b> Group Number 907-14-01454	
<b>Program Deductible</b> Per Individual Family Limit Waived for Type I Services	\$50 Contract Year 3 Yes
<b>Type I                      Preventive Services</b>	<b>100%</b> oral exams, cleanings (two per 12 months), bitewing X-rays (one per 12 months), space maintainers, pain treatment, sealants, full-mouth X-rays
<b>Type II                      Basic Services</b>  <b>Benefit Waiting Period</b>	<b>80%</b> fillings, anesthesia, endodontics, simple and surgical extractions, oral surgery, periodontics None
<b>Type III                      Major Services</b>  <b>Benefit Waiting Period</b>	<b>50%</b> crowns, inlays, onlays, dentures, bridges, implants 12 months
<b>Contract Year Maximum</b>	\$1,500
<b>Type IV Orthodontia</b>	<i>Not Available</i>

*Disclaimer: This is a summary of benefits only. Please refer to the policy for benefit details. Payment is based upon allowable charges in the area in which service is rendered. Any dentist charge above the allowable charge is not a covered expense.*

Monthly Rates

Employee \$48.96 | Employee plus spouse \$97.92 | Employee plus child(ren) \$100.26 | Family \$152.86

*Rates are guaranteed for 12 months.*



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