

## Enhanced PPO

## School Board of Broward County

	If you use an IN-NETWORK dentist		If you use an OUT-OF-NETWORK dentist	
<b>Calendar-year deductible</b> (excludes orthodontia services)	Individual \$25	Family \$75	Individual \$50	Family \$150
	Deductible applies to all services excluding preventive services.			
<b>Calendar-year annual maximum</b> (excludes orthodontia services)	\$2,000 After you reach the annual maximum amount, you will receive 30 percent coinsurance on preventive, basic, and major services for the rest of the year (excludes orthodontia.)			
<b>Preventive services</b> <ul style="list-style-type: none"><li>• Routine oral examinations (2 per year)</li><li>• Bitewing x-rays</li><li>• Routine cleanings (up to 4 per year)</li><li>• Fluoride treatment (1 per year, through age 16)</li><li>• Sealants (2 per tooth per 12 month, through age 16)</li><li>• Space maintainers (primary teeth, through age 16)</li><li>• Emergency care for pain relief</li></ul>	100% no deductible		90% no deductible	
<b>Basic services</b> <ul style="list-style-type: none"><li>• Amalgam fillings (1 per tooth every 2 years)</li><li>• Composite fillings (1 per tooth every 2 years)</li><li>• Oral surgery (tooth extractions including impacted teeth)</li><li>• Periodontics (periodontal cleanings 4 per year, scaling/root planing and surgery 1 per quadrant every 3 years)</li><li>• Endodontics (root canals 1 per tooth per lifetime and 1 re-treatment)</li></ul>	80% after deductible		70% after deductible	
<b>Major services</b> <ul style="list-style-type: none"><li>• Crowns (1 per tooth every 5 years)</li><li>• Inlays/onlays (1 per tooth every 5 years)</li><li>• Bridges (1 per tooth every 5 years)</li><li>• Dentures (1 per tooth ever 5 years)</li><li>• Denture relines/rebases (1 every 2 years, following 1 year of denture use)</li><li>• Denture repair and adjustments (following 1 year of denture use)</li><li>• Implants (1 every 5 years implant placement, crowns, bridges, and dentures)</li></ul>	50% after deductible		40% after deductible	
<b>Orthodontia services</b>	Adult/child orthodontia. - Plan pays 50 percent (no deductible) of the covered orthodontia services, up to \$1,600 child/\$1,800 adult lifetime orthodontia maximum.			

Non-participating dentists can bill you for charges above the amount covered by your HumanaDental plan. To ensure you do not receive additional charges, visit a participating PPO Network dentist. Members and their families benefit from negotiated discounts on covered services by choosing dentists in our network. If a member visits a participating network dentist, the member will not receive a bill for charges more than the negotiated fee for covered services. If a member sees an out-of-network dentist, coinsurance will apply to the maximum allowable charge of one or more network providers in your geographic area. Out-of-network dentists may bill you for charges above the amount covered by your dental plan.

## Feel good about choosing a HumanaDental plan

### Make regular dental visits a priority

Regular cleanings can help manage problems throughout the body such as heart disease, diabetes, and stroke.\* Your HumanaDental PPO plan focuses on prevention and early diagnosis, providing four exams and cleanings every calendar year: two regular and two periodontal.

\* [www.perio.org](http://www.perio.org)

### Go to MyDentalIQ.com

Take a health risk assessment that immediately rates your dental health knowledge. You'll receive a personalized action plan with health tips. You can print a copy of your scorecard to discuss with your dentist at your next visit.

### Tips to ensure a healthy mouth

- Use a soft-bristled toothbrush
- Choose toothpaste with fluoride
- Brush for at least two minutes twice a day
- Floss daily
- Watch for signs of periodontal disease such as red, swollen, or tender gums
- Visit a dentist regularly for exams and cleanings

Did you know that 74 percent of adult Americans believe an unattractive smile could hurt a person's chances for career success?\* HumanaDental helps you feel good about your dental health so you can smile confidently.

\* American Academy of Cosmetic Dentistry

## Questions?

Simply call 1-866-890-4464 to speak with a friendly, knowledgeable Customer Care specialist, or visit [HumanaDental.com](http://HumanaDental.com).

## Use your HumanaDental benefits

### Find a dentist

With HumanaDental's PPO plan, you can see any dentist. Members and their families benefit from negotiated discounts on covered services by choosing dentists in the HumanaDental PPO Network. To find a dentist in HumanaDental's PPO Network, log on to **Humana.com** or call 1-866-890-4464.

### Know what your plan covers

The other side of this page gives you a summary of HumanaDental benefits. Your plan certificate describes your HumanaDental benefits, including limitations and exclusions. You can find it on MyHumana, your personal page at **HumanaDental.com** or call 1-866-890-4464.

### See your dentist

Your HumanaDental identification card contains all the information your dentist needs to submit your claims. Be sure to share it with the office staff when you arrive for your appointment. If you don't have your card, you can print proof of coverage at **Humana.com**.

### Learn what your plan paid

After HumanaDental processes your dental claim, you will receive an explanation of benefits or claims receipt. It provides detailed information on covered dental services, amounts paid, plus any amount you may owe your dentist. You can also check the status of your claim on MyHumana at **HumanaDental.com** or by calling 1-866-890-4464.

Humana group dental plans are offered by Humana Insurance Company, HumanaDental Insurance Company, Humana Insurance Company of New York, Humana Health Benefit Plan of Louisiana, The Dental Concern, Inc., Humana Medical Plan of Utah, CompBenefits Company, CompBenefits Dental, Inc., Humana Employers Health Plan of Georgia, Inc. or DentiCare, Inc. (d/b/a CompBenefits)

This is not a complete disclosure of plan qualifications and limitations. Your agents will provide you with specific limitations and exclusions as contained in the Regulatory and Technical Information Guide. Please review this information before applying for coverage. The amount of benefits provided depends upon the plan selected. Premiums will vary according to the selection made.

# Humana®

[Humana.com](http://Humana.com)

