

Preventive Plus helps you meet your everyday dental needs. The plan covers services most often used, with the freedom to select any dentist.

	In-network coverage	Out-of-network coverage
Preventive services (no waiting period) <ul style="list-style-type: none"> › Routine oral examinations (limit 2 per year) › Periodontal examinations (limit 2 per year) › X-rays (limit 1 set per year, excludes full mouth and Panoramic) › Cleanings (limit 2 per year) › Topical fluoride treatment (limit 1 per year, age 14 and under) › Sealants (limit of 1 per tooth per lifetime, age 14 and under) 	100% no deductible	70% of in-network fee schedule after deductible
Basic services (six month waiting period applies) <ul style="list-style-type: none"> › Emergency care for pain relief ¹ › Extractions and root removal › Fillings (limit 2 per year, composite covered on front teeth only ²) › Space maintainers (age 14 and under, initial placement only) › Oral surgery › Prefabricated stainless steel crowns 	50% after deductible	30% of in-network fee schedule after deductible
Discount services (no waiting periods) <ul style="list-style-type: none"> › Periodontics › Endodontics (root canals) › Crowns › Implants › Bridgework › Dentures › Denture relines and rebases › Denture repair and adjustments › Inlays and onlays › Appliances for children Orthodontia services <ul style="list-style-type: none"> › Adult and child orthodontia 	Receive an average discount of 28 percent by seeing in-network dentists. ³	Not available
Calendar-year deductible (excludes discount services)	\$50 per individual on the plan, up to a maximum of \$150.	
Annual maximum (excludes discount services)	\$1,000 per individual on the plan	

Out-of-network dentists can bill you for charges above the amount covered by your HumanaOne Dental plan. To ensure you do not receive additional charges, visit a dentist in the HumanaDental PPO network.

Waiting periods and other limitations may apply, please see your policy certificate for coverage details.

1. Emergency care covered at 50% both in-network and out-of-network in state of Illinois (IL).
2. Composite (white) fillings are only covered on anterior (front) teeth. An alternate benefit is allowed for composite fillings on posterior (back) teeth where the plan will cover the cost of an amalgam (silver) filling and the member is responsible for any cost over the covered amount.
3. Dentists in the HumanaDental PPO network provide a discount for services not covered by the plan, with an average savings of 28% on out-of-pocket costs. Some services will have lower than average discounts. Check with in-network providers for specific discounts.

Choose Humana*One* Dental benefits

Be healthy

Good dental health is a reflection of good overall health. For example, the Academy of General Dentistry says there is a link between gum disease and heart problems, and the American Academy of Periodontology says severe gum disease can increase blood sugar, increasing the risk among diabetics. Humana*One* Dental's Preventive Plus plan focuses on prevention, providing exams and cleanings every calendar year.

Be successful

Did you know 74 percent of adult Americans believe that an unattractive smile could hurt a person's chances for career success? That's according to the American Academy of Cosmetic Dentistry. HumanaDental's Preventive Plus plan helps you maintain a healthy and attractive smile.

My Dental IQ

My Dental IQ promotes routine dental care—not only encouraging good oral health, but possibly helping to reduce total healthcare costs over time. Research shows that periodontal (gum) disease has been linked to other serious diseases in the body. The dental health risk assessment at MyDentalIQ.com takes minutes to complete, and immediately delivers a scorecard with health tips tailored to you.

Use your Humana*One* Dental benefits

Find a dentist

With Humana*One* Dental's Preventive Plus plan, you can see any dentist. You can save up to 28 percent on out-of-pocket costs when you visit a dentist in Humana*One* Dental's PPO Network – ask when you schedule your appointment.

Know what your plan covers

The other side of this page gives you a summary of Humana*One* Dental benefits. Your plan certificate describes in detail your HumanaDental benefits.

See your dentist

Simply present your HumanaDental identification (ID) card when you see your dentist. It contains all the information your dentist needs to submit your claims.

Learn what your plan paid

After Humana*One* Dental 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 by calling 1-866-537-0232.



Insured or administered by HumanaDental Insurance Company

This is not a complete disclosure of plan qualifications and limitations. Your broker 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.