



JOURNEY HEALTH SYSTEM/STAIRWAYS BEHAVIORAL HEALTH

Diagnostic/Preventive	100%
<i>Periodic Oral Examinations (1 in 6 months)</i> <i>X-rays (Bitewings-1 in 6 months; Full Mouth Series or Panorol including bitewings-once every 3 years)</i> <i>Fluoride Treatments under age 18 (1 in 6 months)</i> <i>Prophylaxis (1 in 6 months)</i> <i>Space Maintainers and Harmful Habit appliance under age 16</i> <i>Sealants under age 16 (1 per permanent unfilled molar per 36 months)</i> <i>Palliative Emergency Dental Treatments</i>	
Basic Restorative Services	80%
<i>Fillings (limited to amalgam on posterior teeth)</i> <i>Endodontics</i> <i>Oral Surgery</i> <i>General Anesthesia for Complex Oral Surgery</i> <i>Prosthodontic Repairs</i> <i>Periodontics</i>	
Major/Prosthodontic Services	50%*
<i>* Inlays, Onlays, Crowns (Replacements are limited to once in 5 years)</i> <i>*Prosthodontics (Replacements are limited to once in 5 years)</i> <i>*12-month waiting period for new hires after 3/1/13</i> <i>Missing tooth clause.</i>	
Orthodontics	NONE
Contract Plan Year (July 1 thru June 30) Maximum Benefit Per Person	\$1,000
Orthodontic Lifetime Maximum Benefit	N/A
Contract Year Deductible from July 1 thru June 30 (waived on diagnostic/preventive svcs.)	\$25 Ind./\$75 Family

THIS IS A SUMMARY OF BENEFITS ONLY. POLICY PROVISIONS DETERMINE ALL COVERED DENTAL SERVICES AND BENEFITS INCLUDING EXCLUSIONS, LIMITATIONS, ETC.

Effective Date: 01/01/2022

Restated: 03/01/2013

Insert Date