

## MSHG - TOWN OF WEBSTER PREVENTIVE PLAN

Group Number: 6401

Altus Dental Plus - Includes Connection Dental and DenteMax Networks

**Annual Maximum**

\$500

**Maximum Lifetime Cap**

Unlimited

**Deductible**

Individual \$0

Family \$0

**Dependent Coverage**

Dependent children are covered under these benefits up until the end of the month that they turn 26.

**Plan pays 100%; Member Coinsurance 0%**

- Oral exam twice per calendar year
- Cleaning two per calendar year
- Fluoride treatment for children under age 19 twice per calendar year
- Bitewing x-rays one set per calendar year
- Complete x-ray series or panoramic film once every 36 months.
- Single x-rays as required
- Sealants for children under age 16, once every 36 months on unrestored permanent molars

Monthly Premium effective 7/1/24 - 6/30/26:

Individual: \$20.00   Two Person: \$40.00   Family: \$70.00

**P** Pre-treatment Estimate  
Recommended

**A** Prior Authorization  
Required

See back page for additional  
information



This is a summary of benefits. The information shown here is not a guarantee of payment. Refer to the Certificate of Coverage for the full plan terms. The Certificate includes any limitations or exclusions not seen here. For a complete listing of frequencies and limitations go to [www.altusdental.com/el](http://www.altusdental.com/el). To be covered, services must be dentally necessary and appropriate as per our review guidelines.

***Note: This plan does not include a missing tooth clause. In addition, if covered, crowns, bridges, partials and complete dentures are paid when the permanent structure is inserted (seated) by the dentist.*** Member coverage must be active on the date that the permanent structure is inserted and payment is based on benefits available on that day — for example, if the member's annual maximum has been paid prior to the insertion of the permanent structure, the service will not be paid.

\* Time limits on services (e.g. 6, 12, 24, 36, or 60 months) are figured to the exact day. Services are then covered the following day. For example, when a service is covered once every 12 months, if the service was done on July 1, it will not be covered again until the following year on July 2 or after.

### **Out-of-Network Coverage**

You have the freedom to choose any dentist, but it is important to know that your out-of-pocket costs may be higher when you visit a dentist who does not participate in our network. Non-participating dentists have not agreed to accept the Altus Dental allowance as payment in full, so services from an out-of-network dentist may cost you more. You may also have to pay the dentist at the time of service and file a claim yourself. To be eligible, all claims must be filed within one year of the date of service. To find a participating dentist near you, use our Find A Dentist tool at [www.altusdental.com](http://www.altusdental.com).

### **How to Find a Dentist**

Choose from Altus Dental's extensive network of dentists, you're sure to find one that's right for you. Visit [www.altusdental.com](http://www.altusdental.com) to use our online Find A Dentist tool. You can see if your current dentist participates with us or look for a new dentist by searching by name, location or specialty. Enter your address or other criteria important to you (extended hours, languages spoken, etc.), and our tool will return a list of dentists that meet your needs – as well as maps and driving directions.

### **Beyond Benefits**

When you visit us at [www.altusdental.com](http://www.altusdental.com), you can access a wealth of important dental health information and manage your plan by:

- Checking your benefits and claims
- Reviewing your deductibles and maximums
- Using our Find A dentist tool to find a dentist in your area

### **Notice of Nondiscrimination and Accessibility Policy**

Altus Dental does not discriminate on the basis of race, color, national origin, age, disability, or sex.

Español (Spanish): ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-877-223-0588.

Português (Portuguese): ATENÇÃO: Se fala português, encontram-se disponíveis serviços linguísticos, grátis. Ligue para 1-877-223-0588.