Dental Benefits			
	MetLife Dental	Cigna Dental	
	PDP Plus	Basic Dental PPO	Dental & Orthodontia PPO
Annual DPPO & Out-of- Network Deductible	\$50 per person \$150 per family	\$50 per person \$150 per family (No deductible for DPPO Advantage providers)	\$25 per person \$75 per family (No deductible for DPPO Advantage providers)
Preventive & Diagnostic Services (e.g., oral exams, cleanings, x-rays, emergency care to relieve pain)	You pay \$0 (not subject to annual deductible)	You pay \$0 (not subject to annual deductible)	You pay \$0 (not subject to annual deductible)
Basic Restorative Care	You pay 20% coinsurance after deductible	You pay 15% coinsurance after deductible	You pay 15% coinsurance after deductible
Major Restorative Services	You pay 50% coinsurance after deductible	You pay 50% coinsurance after deductible	You pay 15% coinsurance after deductible
Orthodontia	\$1,000 individual lifetime limit for children up to age 19	Not covered	You pay 50% coinsurance up to the individual lifetime benefit limit of \$1,500 after deductible
Annual Benefit Maximum	\$1,500	\$2,000	\$2,000

This chart is a general description & is provided for informational purposes only. It should not be viewed as an offer of coverage. In the event of a conflict between this chart & the official Plan documents, the official Plan documents will govern.