

Applied Intellect LLC

Dental Plan Comparison

Current and Alternate Plans

<i>Benefit Description</i>		OPTION 1 United Concordia - F-3W	
<i>Calendar Year Deductible</i> <i>Annual Benefit Maximum</i> <i>Orthodontia Lifetime Maximum</i>		Single: \$50 Family: \$150 \$2,000 per person N/A	
<i>Class 1 - Diagnostic/Preventive Services</i> Exams Cleanings & Fluoride Treatments X-Rays (Bitewings) X-Rays (All others) Palliative Treatment (Emergency) Space Maintainers Sealants		Plan pays 100% Plan pays 100% Plan pays 100% Plan pays 100% Plan pays 100% Plan pays 100% Plan pays 100%	
<i>Class 2 - Basic Services</i> Basic Restorative Simple Extractions Complex Oral Surgery Endodontics Non-Surgical Periodontics Surgical Periodontics		Plan pays 80% after deductible Plan pays 80% after deductible Plan pays 80% after deductible Plan pays 80% after deductible Plan pays 80% after deductible Plan pays 80% after deductible	
<i>Class 3 - Major Services</i> Inlays, Onlays, Crowns Prosthetics (Bridges, Dentures)		Plan pays 50% after deductible Plan pays 50% after deductible	
<i>Waiting Period</i>		None	
<i>Out of Network Reimbursement</i>		90th Percentile of U&C	
Employee	Benefit Tier	EE Monthly Amount	EE Cost Per Pay
	Employee Only	\$14.16	\$6.54
	Employee & Spouse	\$28.03	\$12.94
	Employee & Child(ren)	\$25.38	\$11.71
	Family	\$42.44	\$19.59
Employer	Benefit Tier	Original Rates	AI Flat Contribution
	Employee Only	\$35.40	\$21.24
	Employee & Spouse	\$70.07	\$42.04
	Employee & Child(ren)	\$63.45	\$38.07
	Family	\$106.11	\$63.67