

Dental Summary



Customized For:
Nuvia MSO, LLC

Effective Date: Jan 01, 2026
Renewal Date: Jan 01, 2027

Contributory PPO MAB Classic + MaxRewards
DentalSelect Platinum Network

Single Option

	Contracted Dentist	Non-Contracted Dentist
Preventive Routine exams, cleanings (2 per year), topical fluoride, x-rays Waiting Period: None	100%	100% of Fee Schedule
Basic Composite fillings, extractions, oral surgery Waiting Period: None	80%	80% of Fee Schedule
Major Crowns, bridges, dentures, endodontics, periodontics Waiting Period: None	50%	50% of Fee Schedule
Orthodontics (Children Under 19) Coinsurance: Lifetime Maximum: Waiting Period:	50% \$1,000 None	
Maximum Benefit Applies to Preventive, Basic and Major Services Maximum benefit amount is per person, per Calendar Year The maximum benefit increases each year you are enrolled in the plan	Year 1: \$1,200 Year 2: \$1,300 Year 3: \$1,500 Year 4: \$1,800 Year 5: \$2,200 Year 6: \$2,700 Year 7: \$3,200 Year 8: \$3,700 Year 9: \$4,200 Year 10: \$4,700 Year 11+: \$5,000	
Deductible Applies to Basic and Major Services Per person, per calendar year / Family maximum	\$50 / \$150	\$50 / \$150