

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	100%	100% of Fee Schedule
Waiting Period: None		
Basic		
Composite fillings, extractions, oral surgery	80%	80% of Fee Schedule
Waiting Period: None		
Major		
Crowns, bridges, dentures, endodontics, periodontics	50%	50% of Fee Schedule
Waiting Period: None		
Orthodontics (Children Under 19)		
Coinurance:	50%	
Lifetime Maximum:	\$1,000	
Waiting Period:	None	
Maximum Benefit		
Applies to Preventive, Basic and Major Services	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	
Maximum benefit amount is per person, per Calendar Year		
The maximum benefit increases each year you are enrolled in the plan		
Deductible	\$50 / \$150	\$50 / \$150
Applies to Basic and Major Services		
Per person, per calendar year / Family maximum		