

Plan Description

The Aflac Dental Plan gives you something to smile about. Rely on us for access to affordable dental care and more.

Features and Plan Provisions (specific provisions and descriptions may vary by state)	
Benefit Amounts	See benefit schedule for available options
Requirements	MMA agree to a block renewal strategy for all groups written under the this product offering
Eligibility	Employees who are active full time employees working at least 30 hours per week and have been continuously employed for the duration set by the employer. Seasonal and temporary employee are not eligible. Dependents are eligible, but only if the employee is eligible and participates.
Enrollment Assumptions	Enrollments take place once each 12-month period. Later enrollees cannot enroll outside of an annual enrollment period.
Broker Commissions	10.0%
Number of Eligible Lives	5 -199
Participation	5 Enrolled Lives
Rate Guarantee	12 months
Rate Cap(s)	N/A
Effective Date	05/01/2022
Product Type	PPO Plan
Ineligible Industries	Dental Offices, Dental Services Offices, Non-Traditional Groups (Unions, PEOS, Trusts, Associations, Etc), Cannabis Related Groups, and Native American Tribes
Benefit Waiting Period	Not Applicable
Nation Wide Excluded States	FL/WA under 51 lives, NC, NJ, NY, PR

Plan Benefits Option 1

(Descriptions of specific benefits may vary by state.)

PPO Plan Summary	In-Network / Out-of-Network	In-Network / Out-of-Network
Coverage		
Deductible	\$50 Annual; Max 3 per family	\$50 Annual; Max 3 per family
Deductible waived for A services	Waived	Waived
Calendar Year	\$1000	\$1000
Class A - Preventive	100%	100%
Class B - Basic Restorative	80%	80%
Class C - Major Restorative	60%	60%
Class D - Orthodontia	Not Covered	Not Covered
Network Negotiated Fee	Negotiated Fee / 90th Percentile	Negotiated Fee / 90th Percentile
Orthodontia Maximum	Not Covered	Not Covered

Benefit and Premium Rates

Premiums	AK, CA, CT, DC, DE, HI, ME, MA, NH, RI, VT, WA	All Other States
Members/Coverage	Monthly Rate	Monthly Rate
Employee	\$36.46	\$28.93
Employee & Spouse	\$71.37	\$56.65
Employee & Child(ren)	\$97.92	\$77.72
Family	\$150.37	\$119.35

Preventive Benefits	Frequency
Cleanings (Prophylaxis)	2 per calendar year
Exams	2 per calendar year
Fluoride treatments	1 per 12 months, Under age 19
Radiographs - Intraoral (Periapical/Occlusal)	1 every 12 months
Sealants	1 tooth per 36 months, Under age 16
Space Maintainers	Maximum of 1 each tooth per 24 months, Under Age 16

Basic Benefits	Frequency
Radiographs Full Mouth	1 every 36 months
Restorations Anterior and Posterior (Amalgams & Resin)	Under age 19, replacing existing only if in place for 12 months. Age 19 and over, replace existing only if in place for 36 months.
Emergency Palliative Treatment	

Major Benefits	Frequency
Periodontal Maintenance	2 per calendar year
Periodontal Scaling & Root Planning	1 per quadrant per 24 months
Periodontal Surgical Extractions	1 per quadrant per 36 months
Endodontics - Root Canal	One per tooth
Apexification & Recalcification	
Pulpotomy	Dependent Children under Age 14
Pulp Capping	
Pulp Therapy	
Surgical Extractions	
Simple Extractions (Extraction, erupted tooth or exposed root)	
Oral Surgery	
Anesthesia	
Onlays	1 per tooth in 10 calendar years
Prefabricated Stainless Steel Crowns	1 per tooth in 10 calendar years
Crowns	1 per tooth in 10 calendar years
Crown Repairs	6 months must have passed since initial placement
Bridges	1 per tooth in 10 calendar years
Bridge Repairs	6 months must have passed since initial placement
Dentures	1 per tooth in 10 calendar years
Denture Repairs	6 months must have passed since initial placement
Implants	1 per tooth in 10 calendar years

Orthodontia Benefits	Frequency
Orthodontic	Not Covered