



DENTAL PLANS (cont.)
Dental Preferred Provider Organization (PPO)
 Effective January 1, 2009

Florida Combined Life (BlueDental Choice)

Deductible (For Basic and Major Svc. Only)

Per Person Per Plan Year	\$ 50
Per Family Per Plan Year	\$100

	<u>BlueDental Choice Pays*</u>	<u>You Pay</u>
Preventive (Limitations may apply)	100%	0%
Oral Evaluations (Exams)		
Bitewing X-rays		
Prophylaxis (Cleanings) - Adult/Child		
Fluoride Treatment - Child		
Basic (Limitations may apply)	80%	20%
X-rays-Intraoral/Complete Series/Panoramic		
Sealants		
Amalgam Restorations (Silver Fillings)		
Resin-Based Restorations-Anterior and Posterior		
Root Canal Therapy		
Periodontal Treatment		
Extractions - Routine and Surgical		
Major (Limitations may apply)	50%	50%
Crowns - Single Restorations		
Osseous Surgery		
Complete Dentures		
Partial Dentures		
Fixed Partial Dentures (Bridges)		
Benefit Waiting Period		None
Orthodontia Services		Child(ren) to age 19
Orthodontia Lifetime Maximum		\$1,500
BlueDental Pays	100% up to Lifetime Maximum	
Benefit Waiting Period		None
Plan Year Maximum Benefit Per Person		\$1,500

***NOTE:** Non-participating dentists may charge fees in excess of our Fee Schedule and may bill you for the difference.

PREMIUMS: JANUARY 1, 2009 – DECEMBER 31, 2009

- Employee – The College pays 100% for full-time employees**
- Spouse - \$26.58 per month (\$13.29 per pay period)**
- Dependent Child(ren) - \$29.90 per month (\$14.95 per pay period)**
- All Family - \$41.20 per month (\$20.60 per pay period)**