Renaissance
DENTAL · VISION · LIFE · DISABILITY

DENTAL BENEFITS FOR:
Garrison Forest School, Inc.

EFFECTIVE DATE: January 01, 2027

DENTAL BENEFIT HIGHLIGHTS

Voluntary Dental PPO - High

	VOLUNTARY DENTAL PPO - HIGH PAYS	
	IN-NETWORK	OUT-OF-NETWORK
Diagnostic & Preventive Services Diagnostic and Preventive Services — includes exams, cleanings, fluoride, and space maintainers Brush Biopsy — to detect oral cancer Radiographs — X-rays Sealants — to prevent decay of permanent teeth	100%	100%
Basic Services Emergency Palliative Treatment — to temporarily relieve pain Other Basic Services — misc. services Periodontic Services — to treat gum disease Minor Restorative Services — fillings Endodontic Services — root canals Oral Surgery Services — extractions and dental surgery	90%	90%
Major Services Major Restorative Services — crowns and veneers Relines and Repairs — to bridges and dentures Prosthodontic Services — bridges, implants, and dentures	60%	60%
Orthodontics Orthodontic Services — braces (up to age 19)	50%	50%
ADDITIONAL PLAN INFORMATION		
Allowed Amounts — in-network and out-of-network providers	PPO Fee	PPO Fee
Calendar Year Maximum — per person per Calendar Year Maximum. Applies to all services except orthodontic services. Includes Early Ortho Max Extender.	$5,000	$5,000
Orthodontic Lifetime Maximum	$1,500	
Calendar Year Deductible — per person/per family. Does not apply to any Diagnostic & Preventive Services	$50/$150	

Services are included in our Major Services Guarantee. For more information see next page.

FIND AN IN-NETWORK DENTIST AT:
MYRENPROVIDERS.COM

NOTE: This is not a policy and the descriptions of the policy(ies) are in summary form. If a discrepancy exists, the policy(ies) will control in all instances. For a complete description of benefits, exclusions, limitations, reduction of benefits, and/or terms under which the policy(ies) may be continued in force or discontinued, please refer to the policy(ies).

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ADDITIONAL DENTAL INFORMATION

Waiting Period: None

Maximum Payment: Per person total per Calendar Year on Diagnostic & Preventive, Basic and Major Services. Plan payment will not exceed the higher amount shown in any benefit period or lifetime.

Deductible: Per person total per Calendar Year limited to a maximum family deductible per Calendar Year. Does not apply to any Diagnostic & Preventive Services

Early Ortho Max Extender: Services performed in the dental office related to "Early Orthodontic" treatment will be counted toward your Annual Maximum, rather than your Orthodontic Maximum.

Major Services Guarantee: Benefits for Endodontic, Major Restorative, or Prosthodontic services received from an in-network dentist, will be paid up to 100% of the repair or equivalent replacement of the covered services, as deemed reasonable and appropriate at the sole discretion of Renaissance, for as long as you remain insured under the certificate. Replacement solely for cosmetic or aesthetic reasons is not included. To qualify for this guarantee, you must receive at least one Diagnostic & Preventive exam and cleaning each benefit year after the initial benefit was received.]

The Plan Specifications Are Subject To The Following Exclusions And Limitations: Payment will not be made for procedures to replace a missing tooth or teeth that were lost prior to becoming a Certificate Holder or Eligible Dependent under this Policy. Oral Exams are payable twice any Benefit Year. Prophylaxes are payable twice any Benefit Year. Fluoride treatments are payable once any Benefit Year up to age 14. People with specific at-risk health conditions may be eligible for additional prophylaxes (cleanings) or fluoride treatment. The patient should talk with his or her dentist about treatment. Bitewing Radiographs are payable once any Benefit Year and Full Mouth Radiographs are payable once any 5 year period. Sealants are payable only for the occlusal surface of first and second permanent molars once any 3 year period up to age 14. The surface must be free from decay and restorations. Space Maintainers are payable once a lifetime up to age 14. Crowns, Inlays, Veneers, Bridgework and Dentures are payable once any 10 year period. Implants are payable once a lifetime.

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