

HumanaOne Dental Preventive Plus



Kansas

Preventive Plus helps you meet your everyday dental needs. The plan covers services most often used, with the freedom to select any dentist.

	In-network coverage	Out-of-network coverage
Preventive services (no waiting period) > Routine oral examinations (limit 2 per year) > Periodontal examinations (limit 2 per year) > X-rays (limit 1 set per year, excludes full mouth and Panoramic) > Cleanings (limit 2 per year) > Topical fluoride treatment (limit 1 per year, age 14 and under) > Sealants (limit of 1 per tooth per lifetime, age 14 and under)	100% no deductible	70% of in-network fee schedule no deductible
Basic services (six-month waiting period applies) > Emergency care for pain relief > Extractions and root removal > Fillings (limit 2 per year, composite covered on front teeth only ¹) > Space maintainers (age 14 and under, initial placement only) > Oral surgery > Prefabricated stainless steel crowns	50% after deductible	30% of in-network fee schedule after deductible
Discount services (no waiting period) > Periodontics > Endodontics (root canals) > Crowns > Implants > Bridgework > Dentures > Denture relines and repairs > Denture repair and adjustments > Inlays and onlays > Appliances for children Orthodontia services > Adult and child orthodontia	You may receive an average discount of 28 percent by seeing in-network dentists. ²	Not available
Calendar-year deductible (includes discount services)	\$50 per individual on the plan, up to a maximum of \$150.	
Annual maximum (includes discount services)	\$1,000 per individual on the plan	

Out-of-network dentists can bill you for charges above the amount covered by your HumanaOne Dental plan. To ensure you do not receive additional charges, visit a dentist in the HumanaDental PPO network.

Waiting periods and other limitations may apply; please see your policy certificate for coverage details.

1. Composite (white) fillings are only covered on anterior (front) teeth. An alternate benefit is allowed for composite fillings on posterior (back) teeth where the plan will cover the cost of an amalgam (silver) filling and the member is responsible for any cost over the covered amount.
2. Due to legislation enacted in your state, your provider is not required to offer non-covered in-network services at a discounted rate. Humana encourages all providers to extend the discount, but can not legally require. Dentists in the HumanaDental PPO network provide a discount for services not covered by the plan, with an average savings of 28% on out-of-pocket costs. Some services will have lower than average discounts. Check with in-network providers for specific discounts.

Humana Ppo Fee Schedule

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