



ROMULUS COMMUNITY SCHOOLS Dental Benefits Plan

Administered by ADN Administrators, Inc.

**Teachers (REA) Non-Union Staff Local 1917
Romulus Association of School Administrators (RASA)**

The Plan-at-a-Glance

Benefit Year – July 1 through June 30

Maximum Benefits

Annual Maximum - \$1,000 per covered individual for covered class I, II and III services per benefit year

Lifetime Maximum - \$900 per covered individual for covered class IV services

Deductibles

None

Class I Preventive Services – 100%

Diagnostic and Preventative Services – Used to diagnose and/or prevent dental abnormalities or disease (includes exams, cleanings and fluoride treatments)

Emergency Palliative Treatment – Used to temporarily relieve pain

Class II Restorative Services – 90%

Radiographs – X-rays

Oral Surgery Services – Extractions and dental surgery, including pre-operative and post-operative care

Endodontic Services – Used to treat teeth with diseased or damaged nerves (for example, root canals)

Periodontic Services – Used to treat diseases of the gums and supporting structures of teeth

Relines and Repairs – Relines and repairs to bridges and dentures

Minor Restorative Services – Used to repair teeth damaged by disease or injury (for example, fillings)

Major Restorative Services – Used when teeth can't be restored with another filling material (for example, crowns)

Class III Major Services – 90%

Prosthetic Services – Used to replace missing natural teeth (for example, bridges and dentures)

Class IV Orthodontic Services – 90%

Orthodontic Services (to age 19) – Used to correct malposed teeth and/or facial bones (for example, braces)

-Oral exams, prophylaxes (cleanings), and fluoride treatment (to age 19) are payable twice in any period of 12 consecutive months.

-Bitewing X-rays are payable once in any period of 12 consecutive months and full mouth X-rays are payable once in any five-year period.

-Composite resin (white) restorations and porcelain crowns are not Covered Services on posterior teeth

****Note – Predetermination is recommended for all non-emergency dental treatment exceeding \$200.00 in charges. The treatment plan should be submitted to ADN prior to beginning any treatment. Quotes of benefits does not constitute a guarantee of payment, covered benefits may have limitations or exclusions affecting plan payment. Refer to plan booklet for additional coverage details and limitation.**