

STEP 2: Choose an additional plan option.



Dental/Vision Plan Weekly Rates*

Myself only	\$.425
Myself and 1 dependent	\$.820
Family	\$.12.15

*The vision discount program is not insurance.

Dental/Vision Plan

Dental

It's more than just a pretty face: good health starts with your teeth and gums. If you think going to the dentist isn't really important, think again. Your dental health impacts the rest of your body in serious ways. Research shows that gum disease, an infection of your gums, puts you at risk for conditions such as heart disease, stroke, diabetes and pregnancy complications. And because gum disease is usually painless in the early stages, you may not even know that you have it. That's why going to the dentist is just as important as getting a check-up at the doctor's office.

Big savings on visits to the dentist...all for just a few dollars a week.

Starbridge offers a Dental Plan that is available to you as an additional plan option. You'll save on annual cleanings, fillings and even major procedures such as root canals. Don't wait—your health may depend on it!

Example of How the Dental Plan Works

For illustrative purposes only. Actual fee schedules vary by location.

Periodic Oral Exam	Average Cost	\$36
	CIGNA Network Discount*	-\$12
	Dental Plan reimburses you	-\$17 (see chart below)
	You Pay	\$7

* For a complete list of participating network dentists visit www.starbridge.com

This is how much you'll be reimbursed for each procedure:

Dental Plan Reimbursement Chart \$25 per person annual deductible		
Maximum Covered Charge	Maximum Covered Charge	Maximum Covered Charge
Oral Examination D0120 Periodic Oral Exam* \$17 D0140 Limited Oral Exam/Problem Focused \$27 D0150 Comprehensive Oral Exam † \$27 D9110 Emergency - Palliative Treatment \$38	X-Ray and Pathology D0210 Entire Dental Series (Intraoral) Including Bitewings** \$40 D0220 Single Film - Initial \$7 D0230 Single Film - Each Additional \$7 D0240 Intra-Oral Occlusal Film** \$10 D0250 Extraoral - First Film \$11 D0260 Extraoral - Each Additional \$9 D0270 Bitewing Film, One* \$8 D0272 Bitewing Films, Two* \$12 D0274 Bitewing Films, Four* \$17	Prophylaxis and Fluoride D1110 Prophylaxis for age 14 and over* \$30 D1120 Prophylaxis for age under 14* \$20 D1203 Topical Application of Fluoride, Child* \$12 D1204 Topical Application of Fluoride, Adult* \$12 D1351 Sealant, Per Tooth \$16
Amalgam Restoration for Primary/Permanent Teeth D2140 Amalgam Filling - 1 Surface \$35 D2150 Amalgam Filling - 2 Surfaces \$45 D2160 Amalgam Filling - 3 Surfaces \$56 D2161 Amalgam Filling - 4 or more Surfaces \$64	Extractions D7140 Extraction-Erupted tooth or exposed root \$39 D7220 Removal Impacted Tooth - Soft Tissue \$45 D7230 Removal Impacted Tooth - Partially Bony \$70 D7240 Removal Impacted Tooth - Completely Bony \$85 D7241 Removal Impacted Tooth - Completely Bony w/Unusual Surgical Complications \$85 D7250 Removal Residual Tooth Roots \$30 D7510 Incision & Drainage of Abscess \$45 D9220 General Anesthesia \$52	Periodontics D4341 Scaling and Root Planing, Per Quadrant \$72 D4355 Full Mouth Debridement to Enable Comprehensive Periodontal Evaluation \$50 D4910 Periodontal Maintenance \$53
Synthetic Restorations D2330 Composite Resin - 1 Surface \$42 D2331 Composite Resin - 2 Surfaces \$55 D2332 Composite Resin - 3 Surfaces \$67 D2335 Composite Resin - 4 or more Surfaces \$69 D2390 Composite Resin Crown, Anterior \$77 D2391 Composite Resin - 1 Surface Posterior \$50 D2392 Composite Resin - 2 Surfaces Posterior \$68 D2393 Composite Resin - 3 Surfaces Posterior \$85		Endodontics (excluding final restoration) D3220 Therapeutic Pulpotomy \$20 D3310 Root Canal - Anterior \$125 D3320 Root Canal - Bicuspid \$135 D3330 Root Canal - Molar \$140
FOOTNOTES * Limited to once every 6 months † Limited to once every 12 months ** Limited to once every 3 years		

Vision Discount Program*

You and your covered family members receive a membership in the CIGNA Vision Network Savings Program.

- Save up to 40% on frames
- Save \$5 off routine exams and \$10 off contact lens exams

*The vision discount program is not insurance.

Questions? Call a Starbridge Benefits Specialist: 1-877-209-7098 • www.starbridge.com