



Accident Benefits Included with Every Dental Plan

Every BEST Life dental plan automatically includes a separate dental accident benefit that provides coverage of up to \$1,000 per incident for injuries to sound, natural teeth. Plus, this benefit does not count toward the calendar year maximum.

No Waiting Periods

Waiting periods for Major Services and Child Orthodontia are automatically waived for groups with 10 or more enrolling employees.

Implant Coverage

All dental plans that provide coverage for major services will automatically have implant coverage included.

Annual Enrollment Period

All groups have open enrollment once a year which begins one month prior to the renewal date.

Child Good Vision Benefit

Every dental plan automatically includes special vision benefits for children. You get 50% of UCR coverage for an eye exam once every 12 months for eligible dependent children through age 18.

Bundling Discounts

Bundle two or more lines of coverage with 5 or more enrolling employees on each plan and receive up to a 5% dental discount (new group enrollments only).

Census Enrollments

No need to have every employee fill out an individual application. Groups can be enrolled with a master application and an enrollment spreadsheet. No employee signatures necessary.



Dental PPO Plan Summary (California)

Employer sponsored available to groups of 2+ enrolling employees
Voluntary available to groups of 5+ enrolling employees

Through the DenteMax network as well as numerous regional network overlays, BEST Life's members have access to over 280,000 access points nationwide.

Available in CA.

Benefits	HIGH PLAN		MID PLAN		BASIC PLAN	
	In-Network	Out-of-Network	In-Network	Out-of-Network	In-Network	Out-of-Network
Calendar Year Maximum	\$2,500	\$2,500	\$2,000	\$2,000	\$1,500	\$1,500
	\$2,500	\$2,000	\$2,000	\$1,500	\$1,000	\$1,000
	\$2,000	\$2,000	\$1,500	\$1,500	\$500	\$500
	\$2,000	\$1,500	\$1,500	\$1,000		
	\$1,500	\$1,500	\$1,000	\$1,000		
	\$1,500	\$1,000				
	\$1,000	\$1,000				
Calendar Year Deductible (3 per family max)	\$0, \$25, \$50, \$75 or \$100 Waived on Preventive Services					
Class I: Preventive Services Routine oral exam, cleanings, fluoride treatment for children, bitewing x-rays, panoramic/full mouth x-rays, sealants.	100%	100%	100%	80%	100%	80%
Class II: Basic Services Fillings (amalgam, porcelain & plastic), anterior & posterior composites, anesthesia (general or IV sedation), emergency palliative treatment, space maintainers for children, limited oral exam, pathology, oral surgery.	90%	80%	80%	80%	80%	50%
Class III: Major Services Crowns & gold fillings, inlays, onlays & pontics, fixed bridges, implants, complete & partial dentures.	60%	50%	50%	50%	0%	0%
Endodontics	Class II or Class III					
Periodontics	Class II or Class III					
Waiting Periods Automatically waived for groups with 10+ enrolling employees.	12 month waiting period applies to major and orthodontic services Groups enrolling 5-9 employees may qualify for waiver with prior coverage.				None	
Out-of-Network Reimbursement	UCR at 80th or 90th Percentile or MAC					
Special Dental Accident Benefit	\$1,000 maximum per accident to sound, natural teeth					
Children's Good Vision Benefit	Covers 50% of UCR for an eye exam once every 12 months for children through age 18				Not offered	
Orthodontics Option	50%					
Child Only Orthodontic Benefit Option Child Orthodontia is available for groups with 5 or more employees enrolled. (Dependent children through age 18)	\$1,000 Lifetime / \$500 Calendar Year Maximum or \$1,500 Lifetime / \$750 Calendar Year Maximum					
Adult/Child Orthodontia Benefit Option Adult Orthodontia is available for employer-sponsored groups with 25 or more employees enrolled.	\$1,000 Lifetime / \$500 Calendar Year Maximum					