



ConnectiCare Small Group Dental Plans (2-9 enrolled employees)

Effective January 1, 2019 – December 31, 2019

Groups must purchase a ConnectiCare Medical Plan(s) to be eligible for ConnectiCare Dental Plans. Minimum group size is two and minimum enrolling is two. Available to Connecticut groups only.

Coverage	100/80/50 \$1,000 max, no ortho
Single	\$53.75
2-Person	\$107.32
Family	\$164.80
Plan Options	
Annual deductible	\$0
Annual benefit maximum	\$1,000
Orthodontia lifetime maximum	Not covered
Class I Preventive services (deductible does not apply) Includes: oral examinations, diagnostic x-rays, panoramic x-rays, prophylaxis, fluoride, applications, space maintainers	100%
Class II Basic restorations Includes: amalgam and/or composite restorations, fillings	100%
Class II Basic services Includes: endodontics, periodontics, general services	80%
Class III Major services Includes: single crowns, removable prosthetics (dentures) and fixed prosthetics (bridgework)	Restorative crown Only 50%
Class IV Orthodontics (Deductible does not apply)	Not covered

Group premiums are valid for the period 1/1/2019-12/31/2019. Rates apply to new sales. Rates apply to all groups that meet participation requirements as stated above. Groups of 10+ – see 10+ rate sheet for underwriting and eligibility requirements. There are no SIC restrictions. The two to nine dental plans can be sold to groups with no prior coverage. This is only a summary. The Certificate of Insurance controls for actual benefits, exclusions, limitations and other plan terms.

Coverage is underwritten and provided by ConnectiCare Inc., and its affiliates, with services administered through DentaQuest LLC.