

Coverage & Costs

2025 Benefits

Dental Insurance Basic Plan
 Carrier: Sun Life

Your Per Pay Period (50) Contribution:

Employee Only	\$5.65
Employee + Spouse	\$11.89
Employee + Child(ren)	\$15.33
Family	\$21.01

Annual Deductible: (waived for preventive services)	\$50 per person / \$150 family
Annual Plan Benefit Maximum:	\$1,000 (plus Preventative Rewards)
Lifetime Orthodontia Plan Maximum:	\$1,000

In-Network
100%

Preventive: Oral exams, cleanings, fluoride treatment (to age 14), sealants (to age 14), full mouth X-Rays, bite-wing X-Rays, space maintainers (under 19) and intraoral X-Rays.

Basic: Simple extractions, periodontal maintenance, amalgam restorations, composite and silicate restorations, surgical periodontics, endodontics, oral surgery, and general anesthesia. **90%**

Major: Inlays, onlays, crowns, crown buildup, full or partial dentures, and fixed bridges. **60%**

Orthodontia: Available to dependent child(ren) enrolled in the Dental plan under age 26. **50%**

Waiting Period: 12 Months for Major and Orthodontic services.

Dental Insurance Enhanced Plan
 Carrier: Sun Life

Your Per Pay Period (50) Contribution:

Employee Only	\$9.98
Employee + Spouse	\$19.70
Employee + Child(ren)	\$25.80
Family	\$35.51

Annual Deductible: (waived for preventive services)	\$25 per person / \$75 family
Annual Plan Benefit Maximum:	\$2,000 (plus Preventative Rewards)
Lifetime Orthodontia Plan Maximum:	\$2,000

In-Network
100%

Preventive: Oral exams, cleanings, fluoride treatment (to age 14), sealants (to age 14), full mouth X-Rays, bite-wing X-Rays, and intraoral X-Rays, palliative treatment and space maintainers (under 19).

Basic: Simple extractions, periodontal maintenance, amalgam restorations, composite and silicate restorations, oral surgery, general anesthesia, periodontics, surgical periodontics, and endodontics. **90%**

Major (once per 5 years each): Inlays, onlays, crowns, crown buildup, full or partial dentures, fixed bridges and surgical implants. **60%**

Orthodontia: Available to both adults and dependent child(ren) enrolled in the Dental plan. **50%**

Waiting Period: 12 Months for Major and Orthodontic services.

Vision Insurance
 Carrier: Sun Life
 Network: VSP

Your Per Pay Period (50) Contribution:

Employee Only	\$2.33
Employee + Spouse	\$3.92
Employee + Child(ren)	\$4.00
Family	\$6.33

Benefit Frequency:

Exams	Once every 12 Months
Lenses/Contacts	Once every 12 Months
Frames	Once every 12 Months
Safety Lenses	Once every 12 Months
Safety Frames	Once every 24 Months

Copays/Allowance:

<u>In-Network</u>	
Exams	\$10 Copay
Lenses	\$10 Copay
Safety Lenses	\$10 Copay

Frames Up to \$200 Allowance + 20% off balance
 Safety Frames Up to \$130 Allowance + 20% off balance

Contact Lenses - in lieu of eyeglasses

Elective	Up to \$200 Allowance
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Important Contacts

	<u>Carrier/Contact</u>	<u>Telephone</u>	<u>Website or Email</u>
Dental and Vision Insurance Gallagher Contact(s)	Sun Life Financial Stacy May Mickie Thompson	800-247-6875 601-863-8644 985-602-2117	www.sunlife.com/findadentist www.VSP.com Stacy_May@ajg.com Mickie_Thompson@ajg.com

The Summary Above Has Been Provided For Your Convenience. Please Refer To Carrier Summary of Benefits For A Complete Listing Of Benefits And Coverage Available Under Each Plan Option.