Summary of Benefits

Dental Health Maintenance Organization (DHMO) — Cigna Dental Care Access — Patient Charge Schedule (Excerpt) | Effective: 01/01/2027 | Group #: 0012345 (Sample Company, Inc.)

How This Plan Works

Select a network general dentist to manage your dental care. There are no deductibles, no calendar-year maximums, and no waiting periods — you pay the fixed copay listed on the patient charge schedule for each covered procedure. You must use your assigned in-network dental office; there are no out-of-network benefits.

Patient Charge Schedule (Selected Procedures)

Procedure	Your Copay
Office visit	$5
Routine cleaning (adult)	$0
Periodic exam	$0
Bitewing X-rays	$0
Amalgam filling (1 surface)	$12
Composite filling (1 surface)	$28
Crown (porcelain fused to metal)	$330
Root canal (molar)	$310
Simple extraction	$18
Orthodontia (comprehensive treatment)	Set copays — $1,800 lifetime maximum

Plan Provisions

Provision	Detail
Deductible	None
Calendar-Year Maximum	None — use your benefits as much as you need
Waiting Periods	None
Premium Contributions	Employer pays 50% of the employee-only premium
Dependent Age Limit	To age 26

Limitations and Exclusions

Services must be provided or arranged by your assigned network general dentist. There are no out-of-network benefits. Procedures not listed on the patient charge schedule are not covered. This excerpt shows selected procedures only — the full patient charge schedule lists all covered procedures and copays.