

MIDWESTERN DENTAL® PLANS, INC.

GROUP DENTAL PLAN

ENHANCED PLAN E

PROCEDURE

PATIENT COST

DIAGNOSTIC

Charting history, oral examinations, periodic recall
Examination (every 6 months), emergency treatment.

NO CHARGE

Emergency out of area (outside a 50 mile radius)
Reimbursement upon paid receipt from dentist (up to \$50)

RADIOGRAPHIC

Complete intraoral series, periapical and bitewing films

NO CHARGE

Intraoral periapical

NO CHARGE

Each additional single film (periapical or bitewing)

NO CHARGE

Occlusal view x-ray

NO CHARGE

Lateral jaw x-ray each

NO CHARGE

Four bitewing x-ray films

NO CHARGE

Anterior-posterior x-ray of head and jaw

NO CHARGE

Cephalometric examination

NO CHARGE

Panoramic (panography) including bitewings

NO CHARGE

PREVENTIVE

Oral prophylaxis (every 6 months)

NO CHARGE

Topical fluoride treatment following prophylaxis (up to age 19)

NO CHARGE

Space maintainers – unilateral

NO CHARGE

Space maintainers – bilateral

NO CHARGE

OPERATIVE (RESTORATIVE) SERVICES

Primary silver amalgam – 1 surface

NO CHARGE

Primary silver amalgam – 2 surfaces

NO CHARGE

Primary silver amalgam – 3 surfaces or more

NO CHARGE

Permanent silver amalgam – 1 surface

NO CHARGE

Permanent silver amalgam – 2 surfaces

NO CHARGE

Permanent silver amalgam – 3 surfaces or more

NO CHARGE

Silver amalgam reinforcement pins – 1st

NO CHARGE

---each additional pin

NO CHARGE

Composite filling (for front teeth)

NO CHARGE

Composite Class III

NO CHARGE

Composite Class IV

NO CHARGE

Composite post and core, or any build up

NO CHARGE

PROCEDURE**PATIENT COST****PERIODONTIA**

Root scaling & root planing (per quadrant)	NO CHARGE
Gingivectomy, Gingivoplasty (per quadrant)	NO CHARGE
Occlusal adjustments (and/or equilibration)	NO CHARGE
Bite guards	NO CHARGE
Osseous surgery (per quadrant)	NO CHARGE

ENDODONTICS (including radiographs)

Single root canal filling	NO CHARGE
Double root canal filling	NO CHARGE
Triple or more root canal filling	NO CHARGE
Apicoectomy	NO CHARGE

SIMPLE EXTRACTIONS (including local anesthesia)

Single tooth	NO CHARGE
Each additional tooth	NO CHARGE

ORAL SURGERY EXTRACTIONS (including local anesthesia)

Extraction of erupted tooth	NO CHARGE
Extraction of tooth (soft tissue impaction)	NO CHARGE
Extraction of tooth (partial bony impaction)	NO CHARGE
Extraction of tooth (complete bony impaction)	NO CHARGE
Alveoplasty/Alveolectomy (per jaw maximums) Per quadrant in conjunction with extraction	NO CHARGE
Alveoplasty, including ridge extension, arch	NO CHARGE
Excision of benign tumor, lesion diameter up to 2.5 cm.	NO CHARGE
Removal of cyst up to 2.5 cm. diameter	NO CHARGE

PROSTHETICS (including adjustments and relines for 6 months following installation)

Full upper denture	NO CHARGE
Full lower denture	NO CHARGE
Partial upper or lower denture without clasps, acrylic base	NO CHARGE
Partial upper or lower denture with two chrome clasps with rests, acrylic base	NO CHARGE
Partial upper or lower with chrome lingual or palatal bar with two clasps and rests, acrylic base	NO CHARGE
Repair broken full or partial dentures, no teeth damaged	NO CHARGE
Repair broken full or partial dentures, replace broken tooth each additional tooth	NO CHARGE
Repair broken tooth on denture, no other repairs each additional tooth	NO CHARGE
Adding tooth to partial denture to replace extracted tooth each additional tooth	NO CHARGE

PROCEDURE

PATIENT COST

PROSTHETICS CON'T

Reattaching clasp on denture, clasp intact	NO CHARGE
Replacing broken clasp with new clasp on denture	NO CHARGE
Relining upper or lower full or partial denture (office) once every three years	NO CHARGE
Relining upper or lower full or partial denture (lab) once every three years	NO CHARGE
Jump case, complete denture (duplicate of denture) once every three years	NO CHARGE

CROWNS

Acrylic jacket	NO CHARGE
Acrylic with metal (semi-precious)	NO CHARGE
Porcelain jacket	NO CHARGE
Porcelain fused to metal (semi-precious)	NO CHARGE
¾ cast	NO CHARGE
Full cast	NO CHARGE

BRIDGE – PONTICS (fixed) *

Cast (per unit)	NO CHARGE
Maryland Bridge (per unit)	NO CHARGE
Porcelain fused to metal (semi-precious – per unit)	NO CHARGE
Plastic processed to metal (semi-precious – per unit)	NO CHARGE
* Refer to exclusion A24	NO CHARGE

ABUTMENTS

Two surface gold inlay	NO CHARGE
Three or more surfaces gold inlay	NO CHARGE

ORTHODONTIC BENEFITS

Orthodontic benefits include:

- Diagnosis, including models, photographs and cephalograms
- Active treatment
- Retention treatment

Active treatment will be rendered only for functional problems:

- a) One cusp deviation in the occlusion of the maxillary and mandibular arches
- b) Overbite – 4mm. or greater
- c) Crossbites
- d) Overjets – 4mm. or greater
- e) Crowding in excess of 4mm.

Maximum Twenty-four (24) months (to age 19)	NO CHARGE
Adult 19 years or older	\$ 1250.00