



Plan Key Features:

Immediate coverage for basic and major services, including fillings and crowns.

DENTAL BENEFIT HIGHLIGHTS Find A Participating Dentist At MyRenProviders.com	REN ADVANTAGE PLAN PAYS IN-NETWORK / OUT-OF-NETWORK
Diagnostic & Preventive Services	
Diagnostic and Preventive Services—includes oral exams, cleanings and fluoride treatments Emergency Pallative Treatment—to temporarily relieve pain All Radiographs—Bitewings and all other radiographs Other Services—services performed by a Dentist during after-hours visits	Not Covered
Basic Services	
Minor Restorative Services—silver or white fillings Periodontal Maintenance—following active periodontal therapy Relines and Repairs—to dentures	50% / 50%
Major Services	
Major Restorative Services—crowns Endodontic Services—root canals Periodontic Services—cleaning by a specialist Simple Extractions— tooth extractions Complex Oral Surgery Services—extractions and dental surgery Prosthodontic Services—bridges, implants and dentures Other Major Services—misc. major services	50% / 50%
Orthodontics Orthodontic—braces (until 19 years of age)	Not Covered
ADDITIONAL INFORMATION	
Allowed Amounts—fee schedule for in-network / out-of-network providers	PPO Fee
Policy Year Deductible—per enrollee/per family per policy year. Applies to all services except Diagnostic & Preventive Services and Orthodontics.	\$50 / \$150
Annual Maximum—applies to Diagnostic & Preventive, Basic and Major Services	\$1,000 / \$1,000

NOTE: THE ABOVE IS MEANT TO BE A SUMMARY OF COVERAGE. PLEASE SEE THE FULL LEGAL SUMMARY FOR MORE INFORMATION.

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