



Humana Dental Preventive Plus

TX Prev+ INFS+ 100/80/0
Lexington ISD

TEXAS

Services	In-network dentist	Out-of-network dentist INFS
Deductible (excludes orthodontia services)	Individual: \$50 Family: \$150	Individual: \$50 Family: \$150
Deductible applies to all services excluding preventive services.		
Annual maximum (excludes orthodontia services)	\$1,000	
Preventive services Routine oral examinations (3 per year) Bitewing x-rays (2 films under age 10, up to 4 films ages 10 and older) Panoramic x-rays (1 per 5 years combined, Panorex and Full Mouth X-rays share the same frequency; ages 6+) Routine cleanings (3 per year) Periodontal cleanings (4 per year) Fluoride treatment (1 per year, through age 16) Sealants (permanent molars, through age 16) Space maintainers (primary teeth, through age 15) Oral Cancer Screening (1 per year, ages 40 and older)	100% no deductible	
Basic services Emergency care for pain relief Amalgam fillings (1 per tooth every 2 years, composite for anterior/front teeth) Composite fillings (1 per tooth every 2 years, molar teeth) Routine extractions	80% after deductible	
Major services Crowns Inlays and onlays Bridges Dentures Denture relines and rebases Denture repair and adjustments Implants Periodontics (gums) Endodontics (root canals)	These services are not covered under this plan. Members may receive a discount on non-covered services and may contact their participating provider to determine if any discounts are available on non-covered services.	



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Orthodontia services

Adult and child orthodontia

These services are not covered under this plan. Members may receive a discount on non-covered services and may contact their participating provider to determine if any discounts are available on non-covered services.

Predetermination of benefits: For dental care that may cost you over \$300, your dentist will most likely submit a proposed dental treatment plan (known as a predetermination of benefits or prior authorization). Humana will use this information to determine if your dental benefits cover the proposed treatment. This predetermination of benefits must be granted before service is provided and will remain valid for up to 90 days after but is not a guarantee of what Humana will pay toward the treatment. **Before getting treatment, please confirm with your dentist they've received approval from Humana for your treatment plan and provided you a cost for services.**

If a member uses services rendered by providers with whom we have agreements, the fee or maximum allowable charge that we have negotiated with that provider will apply; if a member uses services rendered by a provider with whom we do not have agreements, coinsurance will apply to the maximum allowable charge. Out of network dentists may bill members for charges above the amount covered by the dental plan.



Questions?

Visit [Humana.com](https://www.humana.com) or call **866-427-7478**
Monday – Saturday, 8 a.m. – 11 p.m., and
Sunday, 11 a.m. – 8 p.m., Eastern time.
Find a dentist at [Humana.com/findadentist](https://www.humana.com/findadentist).



Register today!

Register or sign in to MyHumana at [Humana.com](https://www.humana.com)
to view your coverage details, ID cards, manage
claims, find a dentist and more!