



*Exclusively for ISMS and CMS Members...*

# Dental Protection Plan

*Offering you freedom to choose your own dentist*

*PBT now offers you a comprehensive dental insurance plan – not a discount program – that allows you to stay with the dentists you already know, or wish to use.*

*The plan is available to individual physicians and their families, as well as to any size group of two or more employees, and their families. There is no minimum participation requirement.*

*The plan is designed exclusively for those in the medical field – namely Illinois State Medical Society (ISMS) and Chicago Medical Society (CMS) members – who know and understand the importance of quality dental care, and value.*

## Plan Highlights

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- Freedom to choose your own dental providers.
- Available to both individual physicians and their families and groups of two or more, as long as at least one insured is a member of ISMS or CMS.
- \$1,000 calendar year maximum benefit per person.
- Choice of deductibles: \$25 or \$50 per calendar year for each participant (maximum three per family).
- No deductible for preventive dentistry, including oral exams, required x-rays, and preventative cleaning (one cleaning per six months). Charges are paid at 80% of the reasonable and customary rate.
- Basic services, including fillings, root canals, anesthesia, fluoride treatments (age 13 and under), and tissue biopsy, are paid at 80% after the deductible is satisfied.
- Major services, including inlays and crowns, periodontic services, gold fillings, initial dentures, and replacement dentures, are paid at 60% after the deductible is satisfied.



## Eligible Dependents

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Eligible dependents of individual physicians and all covered employees in a group include lawful spouses and all unmarried dependent children under age 25. Dependent children are eligible beyond age 25 if enrolled full-time at an accredited university, college or trade school.

## Waiting Periods

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Participants are eligible for benefits for Preventive and Basic Services after 90 days, if they elect dental coverage when first eligible. For participants who join after they are first eligible, there is a 12-month waiting period for Preventive and Basic Services. Any Major Service requires a one year waiting period.

## Transfer of Group Coverage

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New groups with prior coverage may be eligible for a waiver of certain plan provisions, including accumulated calendar year deductibles and waiting periods. New hires must satisfy all deductibles and waiting periods.

## Exclusions

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The Dental Protection Plan does not provide coverage for: orthodontics; TMJ (temporomandibular joint dysfunction) and related disorders; implants; non-prescription drugs; education; any operation or procedure performed for cosmetic reasons; accidents arising out of and in the course of employment; and illness covered by Workers' Compensation or Occupational Disease Law. Refer to your certificate for a complete list of both benefits and exclusions.

*Administered by Affinity Insurance Services, Inc.*

To learn more about the Dental Protection Plan, including rates, plus other PBT insurance plans for ISMS and CMS members, including health, term life and disability coverage, call toll-free:

**1-800-621-0748 • [www.pbtinsurance.com](http://www.pbtinsurance.com)**