

Cigna Healthcare Financial Exhibit for:  
**Chambliss, Bahner & Stophel, P.C.**



**Low Plan**

Effective Date: July 01, 2024

This is a summary of benefits for your dental plan.

All deductibles, plan maximums, and service specific maximums (dollar and occurrence) cross accumulate between in and out of network.

Your DPPO plan allows you to see any licensed dentist, but using an in-network dentist may minimize your out-of-pocket expenses.

Plan Design	Total Cigna DPPO	Out-of-Network
<b>Policy Year Maximum</b> (Class II, III, IX Expenses)	\$2500, Class I Does Not Apply	\$2500, Class I Does Not Apply
<b>Policy Year Deductible</b>		
Per Individual	\$250	\$250
Per Family	\$500	\$500
<b>Class I Expenses - Preventive &amp; Diagnostic Care</b>		
Oral Exams Cleanings Routine X-rays Fluoride Application Sealants Space Maintainers (limited to non-orthodontic treatment) Non-Routine X-rays	100%, No Deductible	100%, No Deductible
<b>Class II Expenses - Basic Restorative Care</b>		
Emergency care to relieve pain (administrated at In Network coinsurance) Fillings Oral Surgery - Simple Extractions Oral Surgery - All Except Simple Extraction Surgical Extraction of Impacted Teeth Anesthetics Minor Periodontics Major Periodontics Root Canal Therapy / Endodontics Repairs - Dentures Brush Biopsy	70%, After Deductible	70%, After Deductible
<b>Class III Expenses - Major Restorative Care</b>		
Relines, Rebases, and Adjustments Repairs - Bridges, Crowns, and Inlays Crowns/Inlays/Onlays Stainless Steel/Resin Crowns Dentures Bridges	70%, After Deductible	70%, After Deductible
<b>Class IV Expenses - Orthodontia</b>		
Coverage for Eligible Children Only Lifetime Maximum	50%, No Ortho Deductible \$1000	50%, No Ortho Deductible \$1000
<b>Class IX Expenses - Implants</b>		
Plan Policy Year Max	70%, After Deductible \$2500	70%, After Deductible \$2500
<b>Dental Plan Reimbursement Levels</b>	Based on Contracted Fees	90th Percentile of Allowed Charges***
<b>Additional Member Responsibility in excess of Coinsurance</b>	None	Yes, the difference between the member's dentist's billed charges and the dental plan reimbursement level****
<b>Student/Dependent Age</b>	26/26	