

Tailor dental benefits with flexible features and options.

Help employees get the most out of their dental coverage.

Access to dental insurance helps employees manage their out-of-pocket costs—and being covered makes it more likely they'll visit the dentist regularly. That routine, preventive care helps employees avoid dental issues down the road.

Principal® makes it simple to personalize dental designs based on employers' needs, whether they pay for the benefits or their employees do. A wide range of available deductibles, coinsurance, and maximums make customization even easier. Plus, employees have plenty of dentists to choose from within our dental network, which ranks #1 in size in many metropolitan statistical areas.¹

¹ October 2023 Zelis Network360® Analytics Suite.

Coverage highlights

- > Deductibles waived when satisfied with prior carrier
- Refreshed annual maximum when a group becomes effective
- > Mobile app for easy access to benefits, providers, and ID info. Plus, printed ID cards.

And with multiple price points, it's easy to create a design to fit a wide range of budgets.

Additional features offer even more customization.

1 Maximum Accumulation. A portion of the unused calendar-year maximum rolls over to the next year if benefits paid don't exceed the lesser of 50% of the maximum or \$1,000. The yearly rollover is limited to 25% of the maximum up to \$500. The most that can accumulate is one times the maximum, not to exceed \$2,000. In order to use this feature, members must submit a claim each calendar year.

When coverage is transferred to us, we'll honor current rollover balances. The transfer amount is limited to the lesser of the calendar-year maximum with us or \$2,000.

Here's an example with a \$1,000 calendar-year maximum and no rollover from the prior carrier.

	Maximum ²	Claim limit	Benefits paid	Rollover amount	Accumulated rollover
Year 1	\$1,000	\$500	\$450	\$250	\$250
Year 2	\$1,250	\$500	\$850	\$0	\$250
Year 3	\$1,250	\$500	\$450	\$250	\$500

² Calendar-year maximum, plus accumulated rollover from the prior year.

Preventive Passport. Stretches employees' dental benefits by encouraging routine care, which doesn't count against the annual maximum.

	With Preventive Passport	Without Preventive Passport
Yearly maximum	\$1,000	\$1,000
Preventive services (exams, cleaning, fluoride)	\$300 (doesn't count against max.)	- \$300
Basic services (fillings)	- \$200	- \$200
Maximum remaining	\$800	\$500

3 **Dental Employee Choice.** Employers can offer two benefit designs—one at a lower cost. Employees choose the benefit that meets their needs during enrollment.

Employee Choice sample design

Low	High
100/50/25 coinsurance	100/80/50 coinsurance
\$50 deductible for units 2 & 3	\$25 deductible for units 2 & 3
\$500 maximum	\$1,000 maximum
Preventive (exams, cleanings)	Preventive (exams, cleanings, x-rays, sealants)
Basic (x-rays, fillings, sealants)	Basic (fillings, periodontics, oral surgery, endodontics)
Major (crowns, periodontics, oral surgery, endodontics)	Major (crowns)

4 Additional benefit riders. Add these services typically not included in a traditional dental policy. Each has its own coinsurance and lifetime maximum benefits.

Cosmetic services	Dental implants for	Orthodontia coverage	Temporomandibular (TMJ)
for dental cosmetic	implants as well as the	for the straightening	treatment for non-surgical
procedures including teeth	procedures required to	of teeth.	services and devices to help
bleaching and veneers.	place them.		treat TMJ disorders.

Oral health programs. Allow eligible members to receive extra care or get a second opinion. These programs, standard with our dental coverage, help ensure members receive the best possible care.

	Eligible members	Service provided
Periodontal program	Members who are pregnant or have diabetes or heart disease.	If necessary, scaling and root planing covered at 100% or one additional cleaning (routine or periodontal) subject to policy benefits.
Cancer treatment oral health program	Members with cancer who are undergoing chemotherapy or head/neck radiation therapy.	Up to three fluoride treatments yearly covered at 100% plus one additional routine cleaning.
Second opinion program	All members.	Covers second opinions from dental providers at 100%.
General anesthesia program	Members who have autism, Down syndrome, cerebral palsy, muscular dystrophy, or spina bifida.	May receive general anesthesia or intravenous sedation coverage through the voucher program. Services must be administered in a dental office.

Learn more

For more information, contact your local Principal sales representative today.

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