

NBA BENEFIT PLANS

Dental Comparison Grid

Effective date: January 1, 2023



	Plan AB Low	Plan AB High	Plan ABC	Plan ABCD
Plan Benefits				
Type 1	100%	100%	100%	100%
Type 2	80%	90%	80%	80%
Type 3	50%	60%	50%	50%
Deductible	\$50/calendar year – Type 2 & 3 Waived – Type 1 \$150/family	\$50/calendar year – Type 2 & 3 Waived – Type 1 \$150/family	\$50/calendar year – Type 2 & 3 Waived – Type 1 \$150/family	\$50/calendar year – Type 2 & 3 Waived – Type 1 \$150/family
Maximum Per Person	\$1,000 per calendar year	\$1,750 per calendar year	\$1,500 per calendar year	\$1,500 per calendar year
Allowance	80 th U&C	90 th U&C	90 th U&C	90 th U&C
Dental Rewards	Included	Included	Included	Included
Waiting Period	None	None	None	None

Orthodontia – Adult & Child Coverage	Not included	Included	Not included	Included
Allowance	--	U&C	--	U&C
Plan Benefit	--	50%	--	60%
Lifetime Maximum (per person)	--	\$1,000	--	\$1,500
Waiting Period	--	None	--	None

Sample Procedure Listing (Current Dental Terminology American Dental Association)

Type 1	Type 2	Type 3
<ul style="list-style-type: none"> • Routine Exam (2 per benefit period) • Bitwing X-rays (2 per benefit period) • Full mouth/panoramic X-rays (1 in 5 years) • Periapical X-rays • Cleaning (4 per benefit period) • Fluoride for children age 18 and under (1 per benefit period) • Sealants (age 15 and under) • Space maintainers 	<ul style="list-style-type: none"> • Restorative amalgams • Restorative composites (anterior and posterior teeth) • Endodontics (nonsurgical) • Endodontics (surgical) • Periodontics (nonsurgical) • Periodontics (surgical) • Denture repair • Simple extractions • Complex extractions • Anesthesia 	<ul style="list-style-type: none"> • Onlays • Crowns (1 in 5 years per tooth) • Crown repair • Implants • Prosthodontics (fixed bridge; removable complete/partial dentures) (1 in 10 years)

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