



Baldwin Wallace College Dental With Orthodontia

Benefits	
Benefit Period	January 1 st through December 31 st
Dependent Age Limit	Age 23, Removal on Birthday
Benefit Period Maximum (per member)	\$750
Benefit Period Deductible - Single/Family	\$50/\$100
Orthodontic Lifetime Maximum	\$1,000
Preventive Services	
Oral Exams – two per benefit period	100%
Bite Wing X-Rays – two sets per benefit period	100%
Sealants – one every rolling 36 months per tooth	100%
Prophylaxis (cleaning) – two per benefit period	100%
Fluoride Treatment – one treatment per benefit period, limited to dependents up to age 19	100%
Space Maintainers- limited to eligible dependents up to age 19	100%
Emergency Palliative Treatment – includes emergency oral exam	100%
Essential Services	
Consultations and Other Exams by Specialist	50% after deductible
Diagnostic X-Rays – including Full Mouth/Panorex, which are limited to one every 36 consecutive months	50% after deductible
Minor Restorative Services	50% after deductible
Endodontics/Pulp Services	50% after deductible
Periodontal Services	50% after deductible
Repairs, Relines & Adjustments of Prosthetics	50% after deductible
Simple Extractions	50% after deductible
Impactions	50% after deductible
Minor Oral Surgery Services	50% after deductible
General Anesthesia	50% after deductible
Complex Services	
Gold Foil Restoration	50% after deductible
Inlays, Onlays – one every five years (Age 16 & Over)	50% after deductible
Crowns – one every five years (Age 16 & Over)	50% after deductible
Bridgework (Pontics & Abutments) – one every five years	50% after deductible
Partial or Complete Dentures – one every five years	50% after deductible

Benefits	
Orthodontic Services – Orthodontia Covered for Adults & Dependent Children to Age 23	
Orthodontic Diagnostic Services	50%
Minor Treatment for Tooth Guidance	50%
Minor Treatment for Harmful Habits	50%
Interceptive Orthodontic Treatment	50%
Comprehensive Orthodontic Treatment	50%

Note: Benefits will be determined based on Medical Mutual's medical and administrative policies and procedures.

This document is only a partial listing of benefits. This is not a contract of insurance. No person other than an officer of Medical Mutual may agree, orally or in writing, to change the benefits listed here. The contract or certificate will contain the complete listing of covered services.

In certain instances, Medical Mutual's payment may not equal the percentage listed above. However, the covered person's coinsurance will always be based on the lesser of the provider's billed charges or Medical Mutual's negotiated rate with the provider.