

# GBA Insurance Trust, Inc.

## 2022 Summary of Dental Benefits for Plan # 274

### Calendar Year Deductibles

Individual	\$100
Family	\$300

**Annual Maximum Benefit (per person)** \$1,250

**Preventive & Diagnostic (deductible waived)** 100%

Includes 2 oral exams, cleanings & x-rays per year

**Basic Dental Services** 80%

Includes oral surgery, root canals, fillings, sealants etc.

**Major Dental Services** 50%

Includes crowns, bridges, & dentures

**Orthodontic Services (Adult and Children)**

Percentage	50%
Lifetime maximum benefit	\$1,000

### For more information:

Dentist Network on the Internet	<a href="#">search by Plan 100/200/300</a>	<a href="http://www.anthem.com">www.anthem.com</a>
Paragon Customer Service		877-380-0193
Claims Portal	<a href="#">Registration Code 90006065</a>	<a href="https://paragon.vgagateway.com">https://paragon.vgagateway.com</a>
Plan Certificates		<a href="http://www.gabankers.com">www.gabankers.com</a>

*\*Reimbursements subject to usual & customary & reasonable limitations*

*Late enrollees will not have major or orthodontic services for the first 18 months.*

*Employee must be covered under dental coverage in order to insure dependents for dental coverage  
Dental Coverage is available for employees and dependents with or without medical insurance*