2024 Momentum dental coverage

Optional family dental

Adult benefits	In-network	Out-of-network	Benefit maximum
Cleanings/X-rays (Class A) Includes exams, X-rays, bitewings, cleanings, and fluoride.	100% coverage	No coverage	1 visit per 6 months
Basic restorative (Class B) Includes therapeutic pulpotomy, repair/adjustment of dentures and oral surgery procedures such as wisdom tooth or other tooth extractions. Benefit limits may apply to posterior composite fillings.	20% coinsurance	No coverage	\$1,000 benefit maximum per year
Major restorative (Class C) Includes such services as crowns, root canals, apicoectomy, gingivectomy, dentures, implants, and occlusal guards.	50% coinsurance	No coverage	
Orthodontics	Not covered	Not covered	Not covered

Pediatric (up to age 19) benefits	In-network	Out-of-network	Benefit maximum
Cleanings/X-rays (Class A) Includes exams, X-rays, bitewings, cleanings, fluoride, sealants, and space maintainers.	100% coverage	No coverage	1 visit per 6 months
Basic restorative (Class B) Includes therapeutic pulpotomy, repair/adjustment of dentures and oral surgery procedures such as wisdom tooth or other tooth extractions. Benefit limits may apply to posterior composite fillings; age limits may apply to certain procedures.	30% coinsurance	No coverage	No benefit maximum
Major restorative (Class C) Includes such services as crowns, root canals, apicoectomy, gingivectomy, dentures, implants, and occlusal guards.	50% coinsurance	No coverage	No benefit maximum
Orthodontics Covered only when medically necessary. No waiting limits apply.	50% coinsurance	No coverage	No benefit maximum



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