

DENTAL INSURANCE

Exclusions and Limitations

Limited Benefits

This Policy pays limited, fixed indemnity benefits for Dental Treatments only. See the Policy Schedule for the limited benefit amounts and maximum benefit limitations.

Exclusions

We will not pay benefits for any of the following:

1. any procedure or treatment not shown on the Policy Schedule.
2. any procedure rendered during an applicable Benefit Waiting Period.
3. any amount in excess of a Calendar Year or lifetime maximum benefit limitation.
4. Dental Preventive Benefits when there is less than 150 calendar days between the dates of service for Dental Preventive Services.
5. all Experimental or Investigative Services.
6. any procedure performed by a person other than a Dentist or Dental Hygienist.
7. any procedure performed by a Covered Person's Immediate Family Member.
8. all services that are not Dentally Necessary.
9. repairs to dental work less than 180 calendar days following completion of the initial procedure.
10. prosthetics replaced less than 5 years following the previous placement.
11. crowns replaced less than 5 years following the previous placement.
12. inlays or onlays replaced less than 5 years following the last placement.
13. dental implants or the removal of implants.
14. Cosmetic Services, unless performed to correct a functional disorder.
15. services performed outside the United States and, its territories and Canada except for services that are received for Emergency Dental Treatment.
16. replacement of any tooth missing prior to the Effective Date.

17. placement of full or partial dentures, whether removable or fixed, including a Maryland Bridge, unless replacing a Functioning Natural Tooth extracted after the Effective Date and not within a Benefit Waiting Period.
18. for Covered Persons under age 16, inlays, onlays, bridgework or crowns except for stainless steel or plastic crowns.
19. any charge or procedure for treatment required because of Dental Injury or disease due to:
 - a. war or any act of war, whether declared or undeclared.
 - b. participation in the military service of any country or international organization, including non-military units supporting such forces.
 - c. taking part in a riot or insurrection, or an act of riot or insurrection.
 - d. participating in, voluntarily attempting to commit or commission of a felony, whether or not charged, or engaging in an illegal occupation or activity at the time of an Accident.
 - e. voluntary use of any controlled substance, as defined by statute, except when administered in accordance with the advice of the Covered Person's health care practitioner.
 - f. riding in any aircraft not licensed to carry passengers or not operated by a duly licensed pilot.
 - g. charges for treatment or services required due to an Injury sustained in operating a motor vehicle while the Covered Person's blood alcohol level, as defined by law, was .08 or higher. This exclusion applies whether or not the Covered Person is charged with any violation in connection with the Accident.
20. procedures rendered before the Effective Date or after the termination date of coverage.
21. orthodontic treatment and services, except as otherwise covered under the Cleft Lip and Cleft Palate benefit provision under the Dental Indemnity Insurance Benefits section.