



Preferred 1800 Plan Benefits

Annual maximum
\$1800

Annual Deductible
\$50/\$100
excludes diagnostic and preventive

Waiting Periods
None

PRICING

Subscribers	Dental Only	Dental + Cosmetic
Single	\$35.27	\$37.39
Couple	\$69.29	\$78.78
Family	\$129.70	\$146.24

COVERAGE DETAILS

Service	In Network	Out of Network
Preventive	100%	100%
Fillings	80%	80%
Periodontics	50%	50%
Endodontics	50%	50%
Oral Surgery	50%	50%
Major	50%	50%

Optional Cosmetic:

Includes Ortho w/\$1000 lifetime max and additional cosmetic procedures under the General Annual Maximum.



Scan the QR code to visit dencap.com/preferred-1800-plan

1. Open your camera app
2. Point your camera at the QR code to scan it

*Minimum 5 subscribers; dual enrolled groups require a minimum of 10 subscribers combined DHMO/DPOS