



FLEX ESSENTIAL PLAN

DENCAP's Flex Essential Plan is a full dental plan with coverage for almost all dental procedures. This is a DHMO Plan utilizing DENCAP's DHMO Network.

MAXIMUMS

Primary Care: \$1,200

Specialty Care: not included

TOTAL ANNUAL MAXIMUM: \$1,200

Rate is per family member on plan

ORTHODONTIC COVERAGE

\$1,800 Benefit (under 19)

\$1,200 Benefit (over 19)

Lifetime max at in-network dentist

PLAN COVERAGE

Comparable to a 100/70/60 PPO plan

Exams, Basic Cleanings, Fluoride at 100%

Specialty Care at 50%

No Deductibles

Plan coverage has fixed co-payments for covered procedures. See [schedule of benefits](#) for plan details.

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ANNUAL MAXIMUMS (per each member)		OFFICE VISIT CO-PAY	
Primary Care	\$1,200	Office Visit (for diagnosis)	\$10
Specialty Care	Not Covered	Office Visit (single hours)	\$10
ORTHODONTIC (Class I - Preventive)			
0120* Periodic Oral Evaluation	\$0	2140* Amalgam Filling - one surface	\$70
0140* Limited Oral Evaluation - problem focused	\$0	2150* Amalgam Filling - two surfaces	\$70
0150* Comprehensive Oral Evaluation	\$0	2160* Amalgam Filling - three surfaces	\$80
0401* Radiographic Test	\$0	2181* Amalgam Filling - four or more surfaces	\$110
1110* Prophylaxis/Fluoride Cleaning - adult	\$0	2201* Composite Filling - one surface, anterior	\$85
1120* Prophylaxis/Fluoride Cleaning - child	\$0	2221* Composite Filling - two surfaces, anterior	\$90
0901* Retentive - supragingival, labial, with wax	\$0	2232* Composite Filling - three surfaces, anterior	\$95
0902* Retentive - supragingival, labial, with wax	\$0	2233* Composite Filling - four surfaces, anterior	\$100
RESTORATIVE (Class II - Basic)			
1200* Typical Application of Fuction - varnish	\$0	2281* Composite Filling - one surface, posterior	\$80
1201* Typical Application of Fuction - including varnish	\$0	2292* Composite Filling - two surfaces, posterior	\$105
1202* Oral Hygiene Instruction	\$0	2293* Composite Filling - three surfaces, posterior	\$110
RADIOGRAPHS (Class I - Preventive)			
0210* Intraoral - complete series	\$0	2394* Composite Filling - four surfaces, posterior	\$160
		2395* Prosthetic Repair (Class II - Basic)	\$160
		2396* Reattachment Partial Coverage Restoration	\$70

QUESTIONS?

Our live, local customer service team is standing by to assist you. Call

(313) 972-1400

FIND A DENTIST

Need to find a dental office location? Visit

dencap.com/find-a-dentist

READY TO ENROLL?

Scan the QR code with your smartphone and visit the plan page to see complete details and enroll today!



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