

## Louisiana State Employees and Retirees **Prepaid Plan ~ Highlights**

\*NO Claim Forms \*NO Maximums \*NO Deductibles \*NO Waiting Period

Over 180 procedures covered by co-payments.

Must Select Dentist from Dina Network of Dentists

Network Includes Dentists Across the State of Louisiana

**Operating in Louisiana Since 1978** 

Qualifies for Section 125 (Cafeteria Plan) Deductions

Special Premiums for State Employees and Retirees Only Prepaid Plan Monthly Premiums

Employee Only	\$12.00
Employee + One	\$19.50
Employee + Family	\$26.00



**DINA DENTAL PLAN** We have a plan to fit every smile.

## Louisiana State Employees and Retirees **Prepaid Plan ~ Benefits**

No Waiting Periods \* No Deductibles \* No Annual Maximums

gnostic Procedures	Co-payment
Comprehensive oral exam	\$ 47.00
Limited oral evaluation – problem focused	\$ 33.00
Periodic exam – once every 6 months	\$ 27.00
X-ray – intraoral – periapical - first film – once every 6 months	\$ 15.00
X-ray – intraoral – occlusal – once every 6 months	\$ 21.00
X-ray – extraoral – first film – once every 6 months	\$ 15.00
X-ray – bitewing – 2 films – once every 6 months	\$ 22.00
X-ray – intraoral – complete series – once every 36 months	\$ 59.00
Diagnostic casts	\$ 47.00
eventive Procedures	Co-payment
Routine teeth cleaning – adult – once every 6 months	\$ 48.00
Routine teeth cleaning – child – once every 6 months	\$ 35.00
Fluoride treatment – child – once every 12 months	\$ 20.00
Sealant – each tooth – once every 36 months	\$ 26.00
storative Procedures	Co-payment
Amalgam filling – 1 surface – primary (baby) tooth	\$ 64.00
Amalgam filling – 2 surface – primary (baby) tooth	\$ 81.00
Amalgam filling – 3 surface – permanent tooth	\$ 98.00
Resin filling – 1 surface – anterior (front tooth)	\$ 75.00
Resin filling – 2 surface – anterior (front tooth)	\$ 93.00
Resin filling – 3 surface – anterior (front tooth)	\$115.00
Crown – porcelain-fused to predominately based metal	\$525.00
Crown – porcelain-fused to high noble metal	\$567.00
Crown – full cast – predominately based metal	\$440.00
Core buildup – including any pins	\$127.00
Temporary crown (fractured tooth)	\$ 75.00
Root canal – Anterior (front tooth)	\$350.00
Periodontal scaling and root planning-per quadrant	\$ 96.00
Full mouth debridement for comprehensive periodontal evaluation	\$ 86.00
Denture – complete upper or lower	\$600.00
Immediate denture – upper or lower	\$525.00
Upper partial – resin base – complete	\$471.00
Add tooth to existing partial denture	\$ 83.00
Extraction – single tooth	\$ 64.00
Removal of impacted tooth – soft tissue	\$150.00
Incision and drainage of abscess – intraoral soft tissue	\$109.00

This is only a summary of over 180 dental services included in the plan (participating dentist must be used).