



JOHANNESON'S Group of Companies
Voluntary Group Dental Plan

You may go to any dentist you choose! The Spirit Dental Plan reimburses you for covered dental expenses based upon a percentage of the Reasonable and Customary (R&C) fees for those services. Charges in excess of R&C fees will be the responsibility of the insured.

BENEFIT SUMMARY	COVERAGE
Class A – Preventive Services <ul style="list-style-type: none"> • Two routine exams per calendar year and three cleanings per calendar year • Topical Fluoride treatment for children under age 16 (one per calendar year) • Bitewing X-rays (1 series per calendar year to age 19; and every 2 calendar years for adults) 	100%
Class B – Basic Services <ul style="list-style-type: none"> • Basic fillings • Space Maintainers • Sealants (children to age 16) 	80%
Class C – Major Services <ul style="list-style-type: none"> • One diagnostic X-ray, full or panoramic in any 5 year period • Oral surgery • Crowns, inlays and onlays • Prosthetic services; bridges and dentures • Simple extractions • Implants (endosteal only), up to the allowance for the lowest cost covered traditional procedure • Endodontic treatment • Periodontic services 	1st Year – 10% 2nd Year – 25% 3rd Year – 50%
Deductible	\$100 Lifetime Applies to Class A, B and C services, with a maximum of 3 individual deductibles per family.
Annual Maximum Benefit	\$1,000 Per person per calendar year

Monthly Premiums for Johanneson's, Inc. Effective January 1, 2022-December 31, 2022	
Level of Coverage	Monthly Premium
Employee Only	\$ 39.99
Employee & One Dependent	\$ 79.98
Employee & Family	\$ 119.05

Plan Coordinator: Direct Benefits, Inc., St. Paul, MN
 Insured by: Security Life Insurance Company of America, Minnetonka, MN
 Administered by: Meritain Health, Plymouth, MN