



# DENCAP Dental Plans Group Plans

**313.972.1400**  
**www.dencap.com**

PLAN	HALLMARK	GRAND	DCD	
<b>GROUP SIZE</b>	Group of 3 or More	Group of 5 or More	Group of 1-2	Group of 3 or more
<b>PLAN COSTS</b>	Single <b>\$14.00</b> Two Persons <b>\$26.80</b> Family <b>\$41.00</b>	Single <b>\$17.50</b> Two Persons <b>\$32.00</b> Family <b>\$49.00</b>	Single <b>\$15.80</b> Two Persons <b>\$31.00</b> Family <b>\$45.00</b>	Single <b>\$13.00</b> Two Persons <b>\$26.00</b> Family <b>\$40.00</b>
<b>ANNUAL MAXIMUMS</b>	\$2500 General Dentistry. \$800 Specialty Care. \$800 Pedodontics - Lifetime Max.	\$2500 General Dentistry. \$800 Specialty Care. \$800 Pedodontics - Lifetime Max.	\$2500 General Dentistry. \$500 Specialty Care (includes Pedodontics)	\$2500 General Dentistry. \$500 Specialty Care (includes Pedodontics)
<b>WAITING PERIOD</b>	No Waiting Periods	No Waiting Periods	No waiting period for General Dentistry. 6 Month wait for Specialty Care	No waiting period for General Dentistry. 6 Month wait for Specialty Care
<b>PLAN DETAILS</b>	Type I - Preventive - 100%* Type II - Basic - 60%* Type III - Major - 50%* Type IV - Orthodontics - 35% discount*	Type I - Preventive - 100%* Type II - Basic - 80%* Type III - Major - 60%* Type IV - Orthodontics - 35% discount*	Type I - Preventive - 100%* Type II - Basic - 60%* Type III - Major - 50%* Type IV - Orthodontics - 35% discount*	Type I - Preventive - 100%* Type II - Basic - 60%* Type III - Major - 50%* Type IV - Orthodontics - 35% discount*

### ALL PLANS INCLUDE THE FOLLOWING:

- **LARGE NETWORK OF DENTISTS AND SPECIALISTS**
- **EMERGENCY 24 HOUR CARE SERVICE**
- **10% COMMISSION, FIRST YEAR AND 10% RENEWALS**

### GROUPS OF 5 OR LESS BILLING OPTIONS:

- Quarterly
- Semi-annual
- Annual
- Recurring credit card
- Recurring bank draft (ACH)
- Check or money order (billed monthly) - \$5.00 billing fee

\*PERCENTAGES APPROXIMATE, Based on Member Co-payments as Listed in Schedule of Benefits.