



MEDICAL MUTUAL SERVICES

Stark County Schools Council of Government

Dental Expense Benefits

Calendar Year Deductible Amount

Individual -----	\$25.00
Family -----	\$75.00

Co-Payment (After Deductible amount is Satisfied)

* Preventative and Diagnosis Services -----	100% of R&C
* Basic Restorative Services -----	80% of R&C
* Major Restorative Services -----	80% of R&C
**Orthodontic Services -----	60% of R&C

**** The Dental Deductible amount is waived for Preventative and Diagnostic Services and Orthodontic Services**

Overall Calendar Year

Maximum Benefit ----- \$2,500.00 per person

Orthodontic Lifetime

Maximum Benefit ----- \$1,200.00 per person