



Access to dental care that is important to you!

The Aetna Dental® Indemnity Plan

Virginia Tech

Aetna Dental® Indemnity insurance plan gives you the freedom to visit any licensed dentist in the country for covered services — with no referrals required.

Plan Description

- Traditional fee-for-service dental insurance
- Members have the freedom to visit any licensed dentist
- Specialty and emergency care are covered. No referrals are required.

What the Plan Offers

- Preventive care – exams, cleanings, X-rays and more
- Basic care – fillings, simple extractions, root canals, basic restorative work and more
- Major services – bridges, crowns, and more

Pricing	Annual
Student	\$296
Spouse	\$311
Child(ren)	\$379

Coverage Dates	
Annual Coverage	8/1/11-7/31/12

Enroll Today

- Find complete plan details by visiting www.aetnastudenthealth.com.
- Click on “Find Your School” and enter Virginia Tech.
- Review DocFind® to find dentists in your area.
- Enroll online!

*Discount programs provide access to discounted prices and are NOT insured benefits. The member is responsible for the full cost of the discounted services. Discounts are subject to change without notice. Discount programs may not be available in all states. Discount programs may be offered by vendors who are independent contractors and not employees or agents of Aetna. Aetna may receive a percentage of the fee you pay to the discount vendor.

The Aetna Dental® Indemnity insurance plan is underwritten by Aetna Life Insurance Company (Aetna).

This material is for information only. Dental insurance plans contain exclusions, limitations and benefit maximums. Preferred providers are independent contractors and are neither employees nor agents of Aetna Life Insurance Company, Chickering Claims Administrators, Inc. or their affiliates. Information is believed to be accurate as of the production date; however, it is subject to change. Policy forms issued in OK include: GR-96134.

Benefits Summary	Indemnity
Annual Deductible*	
Individual	\$50
Family	\$150
Preventive Service Covered Percent	100%
Basic Service Covered Percent	80%
Major Service Covered Percent	50%
Annual Benefit Maximum	\$1,250
Office Visit Copay	n/a
Orthodontic Services	Not Covered
Orthodontic Deductible	n/a
Orthodontic Lifetime Maximum	n/a
*The deductible applies to: Basic and Major services only	

Partial List of Plan Provisions	Indemnity
Preventive	
Oral examinations **	100%
Cleanings, including scaling and polishing ** (Adult/Child)	100%
Fluoride **	100%
Sealants (permanent molars only) **	100%
Bitewing X-rays **	100%
Full mouth series X-rays **	100%
Space maintainers	100%
Basic	
Root canal therapy, with X-rays and cultures	
Anterior teeth / Bicuspid teeth	80%
Amalgam (silver) fillings	80%
Composite fillings (anterior teeth only)	80%
Stainless steel crowns	80%
Scaling and root planing **	80%
Gingivectomy	80%
Incision and drainage of abscess	80%
Uncomplicated extractions	80%
Surgical removal of erupted tooth	80%
Surgical removal of impacted tooth (soft tissue)	80%
Major	
Root canal therapy, molar teeth, with X-rays and cultures	50%
Osseous surgery **	50%
Surgical removal of impacted tooth (partial bony/ full bony)	50%
General anesthesia/intravenous sedation	50%
Inlays	50%
Onlays	50%
Crowns	50%
Full & partial dentures	50%
Denture repairs	50%
Pontics	50%
** Frequency and/or age limitations may apply to these services. These limits are described in the booklet/certificate or evidence of coverage.	

If you want to look at the full plan description, which is contained in the Master Policy issued to Virginia Tech, you may view it the Office of Risk Management. Benefits under the Aetna Dental Indemnity plan are subject to reasonable and customary charge limits.