



TEXAS ASSOCIATION *of* COUNTIES HEALTH AND EMPLOYEE BENEFITS POOL

Dental Plan Options

	Plan I	Plan II	Plan III	Plan IV
Maximum Annual Benefit	\$2,000.00	\$1,500.00	\$1,000.00	\$750.00
Preventive Care	100%	100%	80%	80%
Basic Care	80%	80%	80%	80%
Major Services	50%	50%	50%	0%
Annual Deductible <i>(waived for preventive care)</i>	\$50.00	\$50.00	\$75.00	\$75.00
Orthodontic Lifetime Maximum <i>(up to age 19)</i>	50% up to \$2,000.00	50% up to \$1,500.00	50% up to \$1,000.00	Not Available

- A minimum enrollment of 100% of eligible employees.
- A minimum employer contribution of 100% of the employee rate only.
- Groups may select either a 2-rate or 4-rate structure.
- Orthodontics is optional per group, not per individual family.
- No annual enrollment for this coverage