Delivering healthy smiles to California

Humana®

The **Humana Family Dental PPO plan** is great for both you and your family. With an annual maximum of $1,500 for adults and no maximum for children, it covers everything you'd expect, including:



100% coverage on routine dental checkups, plus diagnostic and treatment services*



No waiting periods or annual maximum on any services for children



100% coverage on teledentistry when you're on the go†



More than 19,000 dental providers and specialists in California[1]—so it's likely your dentist is already in our network



No waiting periods on preventive and basic services for adults

You'll also have access to a **nationwide network of more than 135,000 dentists and specialists**.[2]

A more human way to healthcare



Humana gets you a high-quality plan with award-winning satisfaction rates.

- Recognized among consumers as a top choice for healthcare & insurance products.[3]
- Acknowledged for our on-demand assistance for agent service, product education, field marketing and dedicated agent support.[4]



Log in to MyHumana.com 24/7 on your smart device to:

- Check claims status
- Review deductibles and coverage
- Find a dentist or specialist
- Access plan information
- Find educational resources
- Learn about wellness programs
- Chat with a representative

Refer to the **Summary of Dental Benefits and Coverage Disclosure Matrix** for the full list of coverage and benefits for the Humana Family Dental PPO plan.

Sources:

1. Based on Zelis network data, last accessed June 2025.
2. Based on Humana network data, last accessed Oct. 2024.
3. "Health Insurance," American Customer Satisfaction Index, last accessed October 21, 2024, https://theacsi.org/industries/finance-and-insurance/health-insurance/
4. Humana Awards and Recognition

* Out-of-network dentists can bill you for charges above the amount covered by your Humana Dental plan. To ensure you do not receive additional charges, visit a dentist in our nationwide network. Waiting periods and other limitations may apply; please see your policy for coverage details.

† For California: Covered services provided via telehealth are also available on an in-person basis at an in-network or out-of-network provider of your choice, although selection of an out-of-network provider may result in a higher cost-sharing obligation for you. In-network providers will not balance bill you for covered services you receive. Acceptance of covered services from a third-party telehealth provider and submission of claims will serve as consent to the terms of service provided in this notice.

Our health benefit plans have exclusions and limitations and terms under which the coverage may be continued in force or discontinued. For costs and complete details of the coverage, refer to the plan document or call or write your Humana insurance agent or the company. In the event of any disagreement between this communication and the plan document, the plan document will control.

Dental and vision plans, excluding Dental Savings Plus, may have a minimum one year initial contract period.

Payment may include an administration fee. A one-time, non-refundable enrollment fee may apply (the fee is non-refundable as allowed by state requirements). Applicable fees are disclosed at time of enrollment.