

City of Berwyn

Aetna Dental

Summary of Benefit Changes

PPO

50/150 Deductible

Preventative 100% → 100% - Screening, 1st Exam, X-Ray, Cleaning

Basic Services 80% → 90% - Fillings, Extractions, Root Canal

Major Services 50% → 80% - Crowns, Bridges, Dentures, Implants, Surgery

Annual Maximum \$1,000 → \$2,000

Under 20 y/o Ortho Benefit \$1,500 → \$2,000

DMO

0/0 Deductible

Preventative 100% → 100%

Basic Services 100% → 100%

Major Services 40% → 60%

Under 20 y/o Ortho Benefit 40% → 60%

No Annual Benefit Maximum