

**OXFORD AREA COMMUNITY SCHOOLS #793**  
**FULL TIME TEACHERS**  
**GROUP # 6479-0001, 6479-0003**  
**MESSA DENTAL PLANS**  
*Underwritten by Delta Dental Plan of Michigan*

<b>Class I</b> <b>80%</b>	<b>Class II</b> <b>80%</b>	<b>Class III</b> <b>80%</b>	<b>Class IV</b> <b>80%</b>
<p style="text-align: center;"><b><u>Diagnostic</u></b></p> <ul style="list-style-type: none"> <li>• Oral Examination</li> <li>• Prophylaxes</li> <li>• Topical Fluoride</li> <li>• Emergency Palliative</li> <li>• 2 cleanings in 12 months</li> </ul>	<p style="text-align: center;"><b><u>Basic Services</u></b></p> <ul style="list-style-type: none"> <li>• Radiographs</li> <li>• Restoratives</li> <li>• Crowns Jackets</li> <li>• Oral Surgery</li> <li>• Endodontic Services</li> <li>• Periodontal Services</li> </ul>	<p style="text-align: center;"><b><u>Prosthodontics</u></b></p> <ul style="list-style-type: none"> <li>• Procedures for the construction of fixed bridgework partial and complete dentures</li> <li>• Implants</li> </ul>	<p style="text-align: center;"><b><u>Orthodontics</u></b></p> <p>Necessary treatment and procedures required for the correction of malposed teeth to age 19          ⊆ Initial exam, radiographs and extractions are covered under Class I</p>
<b>\$1,000 Class I, II, and III Annual Maximum Per Person</b>			<b>\$1,500 Class IV Lifetime Maximum Per Person</b>

- Plan year runs from July 1<sup>st</sup> – June 30<sup>th</sup>.