

Dental Plan Options

Fulton County offers dental coverage for you and your eligible dependents. Dental coverage is the same for non-Medicare-eligible and Medicare-eligible retirees.

You have two dental plan options:

- Aetna Dental HMO Plan (not available in Louisiana)
- Aetna Dental PPO Plan

To find an in-network dentist, visit Aetna's website at [aetna.com/individuals-families/find-a-doctor.html](https://www.aetna.com/individuals-families/find-a-doctor.html).

Aetna Dental HMO Plan

Under the Aetna Dental HMO Plan, **you and each enrolled family member must choose a primary care dentist**. Your primary care dentist will treat you or refer you for care to other Aetna network providers. The plan pays benefits for preventive, basic and major care when provided by or referred by your primary care dentist (the exception is orthodontia—it's covered, and you don't need a referral for orthodontic care). **Benefits are *not* paid for care provided by or referred by out-of-network dentists, except in emergencies.**

This plan has the following advantages when compared with the Aetna Dental PPO Plan:

- Lower monthly premiums
- No deductible
- No annual benefit maximum
- Generally, lower out-of-pocket expenses when you receive care

Note: The Dental HMO Plan is not available in Louisiana.

Aetna Dental PPO Plan

Under the Aetna Dental PPO Plan, you can receive benefits for care from in-network or out-of-network dentists. However, you'll pay less for care received from in-network dentists. When you receive care from an out-of-network dental provider, you are responsible for paying the difference in cost if your dentist charges more than Aetna's pre-approved network fees. Plus, you may be required to pay the entire cost of care at the time of treatment and submit a claim for reimbursement.

The Aetna Dental PPO network includes more providers than the Aetna Dental HMO network.

Dental Plan Comparison

	Aetna Dental HMO Plan	Aetna Dental PPO Plan	
	In-Network ONLY	In-Network	Out-of-Network*
Deductible	None	Single: \$50 Family: \$150	
Preventive services	100% covered	100% covered	100% covered
Basic services	100% covered	15%	15% PLUS any amount over the R&C
Major services	40%	50%	50% PLUS any amount over the R&C
Annual benefit maximum	None	\$1,500 per person	
Orthodontic services	No referral required. \$1,500 copay (for 2 years of treatment plus 2 years of follow-up)	Deductible: \$50 per person Lifetime maximum: \$1,500 per person	

*The reasonable and customary charge (R&C) is the normal amount charged by most dental providers in your geographic region, as determined by Aetna.

What you'll pay

To see what you'll pay for dental coverage, review the ***2025 Monthly Premium Rates*** insert included with your guide.