

# Optional Dental Plan

**YOU MUST BE ENROLLED IN THE MEDICAL INSURANCE TO BE ELIGIBLE FOR THE DENTAL PLAN**

## Dental Insurance Cost Chart

Open Enrollment Dates for coverage beginning August 1, 2021:

July 19, 2021 thru September 10, 2021

	<u>Annual Cost</u>
<b>Student Only</b>	<b>\$414</b>
<b>Spouse Only</b>	<b>\$410</b>
<b>1 Child</b>	<b>\$302</b>
<b>2 or More Children</b>	<b>\$605</b>

- Annual In-Network Deductible **\$50** per person per policy year, not to exceed **\$150** per policy year per family
- Policy Year Maximum: **\$1,250**

	<u>Preventative</u>	<u>Basic</u>	<u>Major</u>
<b>Coinsurance</b>	Preferred: 100% Non-Preferred: 100%	Preferred: 80% Non-Preferred: 80%	Preferred: 60% Non-Preferred: 60%

### Student Medical Insurance

<http://risk.controller.vt.edu/studentmedicalinsurance.html>

Phone: (540)231-6226

Email: SMI@vt.edu

### Aetna

[www.aetnastudenthealth.com](http://www.aetnastudenthealth.com)

Phone: (866)577-7027