Dental Insurance Shop

Dental Insurance Quotes

Apply Online or Call (855) 871-2242

	Renaissance Dental
	MAX Choice (PPO)
Individual:	**$42.29**/mo
Individual +1:	$76.73/mo
Family:	$114.70/mo
	ENROLL NOW
Deductible:	$50 Annual
Max. Annual Benefit:	$1,200.00
Cleaning:	**Plan Pays** **Year 1** **Year 2** **Year 3** 100% 100% 100% **Waiting Period: No Waiting Period!**
X-ray:	**Plan Pays** **Year 1** **Year 2** **Year 3** 40% 60% 80% **Waiting Period: No Waiting Period!**
Filling:	**Plan Pays** **Year 1** **Year 2** **Year 3** 20% 40% 50% **Waiting Period: No Waiting Period!**
Root Canal:	**Plan Pays** **Year 1** **Year 2** **Year 3** 20% 40% 50% **Waiting Period: No Waiting Period!**
Crown:	**Plan Pays** **Year 1** **Year 2** **Year 3** 20% 40% 50% **Waiting Period: No Waiting Period!**
Oral Surgery:	**Plan Pays** **Year 1** **Year 2** **Year 3** 20% 40% 50% **Waiting Period: No Waiting Period!**
Extractions:	**Plan Pays** **Year 1** **Year 2** **Year 3** 20% 40% 50% **Waiting Period: No Waiting Period!**
Dentures | Bridges:	**Plan Pays** **Year 1** **Year 2** **Year 3** 20% 40% 50% **Waiting Period: No Waiting Period!**
Implants:	Yes
Orthodontia:	Yes - See Brochure for Details
Vision Benefit:	Available - See Brochure for Details

Plan Highlights:	Orthodontia coverage for children under at 19		
Application Fee:	35.00		
Effective Date:	11/09/2026		
Dentist Search:	Dentist Search		
Plan Brochure:	View Plan Brochure		
	ENROLL NOW		