Dental Insurance Shop

# Dental Insurance Quotes

Apply Online or Call (855) 871-2242

| | Spirit Preventative Plus PPO 1000/1500 (PPO) | | |
|---|---|---|---|
| Individual: | $32.72/mo | | |
| Individual +1: | **$67.51**/mo | | |
| Family: | $113.44/mo | | |
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| Deductible: | $100 Lifetime | | |
| Max. Annual Benefit: | Up to $1,500 | | |
| Cleaning: | Plan Pays: Year 1 100%, Year 2 100%, Year 3 100%<br>Waiting Period: No Waiting Period! | | |
| X-ray: | Plan Pays: Year 1 100%, Year 2 100%, Year 3 100%<br>Waiting Period: No Waiting Period! | | |
| Filling: | Plan Pays: Year 1 20%, Year 2 20%, Year 3 20%<br>Waiting Period: No Waiting Period! | | |
| Root Canal: | Plan Pays: Year 1 20%, Year 2 20%, Year 3 20%<br>Waiting Period: No Waiting Period! | | |
| Crown: | Plan Pays: Year 1 20%, Year 2 20%, Year 3 20%<br>Waiting Period: No Waiting Period! | | |
| Oral Surgery: | Plan Pays: Year 1 20%, Year 2 20%, Year 3 20%<br>Waiting Period: No Waiting Period! | | |
| Extractions: | Plan Pays: Year 1 20%, Year 2 20%, Year 3 20%<br>Waiting Period: No Waiting Period! | | |
| Dentures \| Bridges: | Plan Pays: Year 1 20%, Year 2 20%, Year 3 20%<br>Waiting Period: No Waiting Period! | | |
| Implants: | No | | |
| Orthodontia: | No | | |

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| **Vision Benefit:** | No | | |
| **Plan Highlights:** | Annual maximum benefit increases annually: 1000 = year 1, 1500 = year 2+ | | |
| **Application Fee:** | 25.00 | | |
| **Effective Date:** | 11/14/2026 | | |
| **Dentist Search:** | Dentist Search | | |
| **Plan Brochure:** | View Plan Brochure | | |
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