

DENTAL PLAN COMPARISON CHART

FOR ECMC AND TERRACE VIEW



**EMBLEM HEALTH
CURRENT**

**EMBLEM HEALTH
BUY-UP OPTION**

IN - NETWORK		
Preventive Services	100%	100%
Basic Services	100%	100%
Major Services	100%	100%
Child Ortho Services	100%	100%
OUT OF - NETWORK		
Preventive Services	100%	100%
Basic Services	100%	100%
Major Services	100%	100%
Child Ortho Services	100%	100%
ADDITIONAL BENEFIT DETAILS		
Ortho Lifetime Maximum	\$1,200	\$2,500
Individual Maximum	IN-\$1,998/ OON: \$1.275	IN-\$1,998/ OON: \$1,998
Deductible	NONE	NONE
Out-of -Network R&C/ UR	Spectrum Fee Schedule	Preferred Fee Schedule
ADDITIONAL INFORMATION		
Waiting Periods	NONE	NONE
Dependent Age Limits	To Age 19	23/23



Out of Network: Employee may be responsible for the difference between the provider billing and the Emblem Health reimbursement rate.

This analysis is for comparison purposes only. Please refer to benefit plan specifics.