

Dental Plan

Regular dental care is not only essential to good all-around health, but to your appearance, too. Routinely practicing good oral hygiene by brushing and flossing is key to protecting yourself from serious dental problems, but so are regular preventive visits to the dentist.


Eligible employees and their dependents are offered the choice of four dental plan options administered by CompBenefits -- two Dental Maintenance Organizations (DMOs), the High Option and the Low (Basic) Option; a direct access Advantage Plan, and a PPO. Coverage is provided to employees at a comparable group rate.

Employees preparing to retire will be given the opportunity to continue their participation in either the Low Option, High Option, or the Advantage dental plan at the time of retirement.

Whether you choose to participate in the Low Option, the High Option, or the Advantage Plan, you receive the following benefits:

- No deductibles
- No claim forms
- No annual maximum benefit

CompBenefits Dental Plans Comparison Effective 10/01/09

	Low DMO (CS-450)	High DMO (CS 150)	Advantage (AVF1)	PPO (EP500)
Monthly Premiums	EE Only \$ 10.15 EE + 1 \$ 15.85 Family \$ 23.78	EE Only \$ 13.52 EE + 1 \$ 25.27 Family \$ 32.86	EE Only \$ 19.16 EE + 1 \$ 37.78 Family \$ 57.46	EE Only \$ 21.30 EE + 1 \$ 42.03 Family \$ 74.39
Provider Network	Network Providers (assignment required)	Network Providers (assignment required)	Network Providers (no assignment required)	Network or Non-Network
Deductible	n/a	n/a	n/a	\$50

Benefits/Services	Patient Pays			Plan Pays
Routine Office Visit / Preventive Care	\$10 co-pay	\$5 co-pay	\$0	100% no deductible
X-Rays	No Charge	No Charge	No Charge	80% after deductible
Fillings: Amalgam (Silver) Resin Inlay	\$ 30 - \$ 50 \$ 50 - \$150 \$155 - \$190	No Charge \$35 - \$120 \$95 - \$130	\$ 19 - \$ 37 \$ 21 - \$ 49 \$272 - \$365	80% after deductible 80% after deductible ** 50% after deductible
Crown (porcelain fused to high noble metal)	\$370	\$280	\$405	** 50% after deductible
Prosthodontics	\$375 + lab	\$300 + lab	\$420 - \$550	** 50% after deductible
Orthodontics (children under 19)	\$2300	\$1800	\$2100	** 50% after deductible \$500 calendar year max \$1000 lifetime max
Maximums (non-orthodontia) Calendar Year Lifetime	Unlimited Unlimited	Unlimited Unlimited	Unlimited Unlimited	\$1000 Unlimited

New Hires: Coverage is effective the first of the month following 30 days of employment.

**12 month waiting period. Time served on the existing ADP plan immediately preceding new enrollment may be credited towards waiting period.

If a planned treatment is expected to cost more than \$200, it is recommended that you send a dental treatment plan in prior to beginning treatment. You and/or your dentist will be notified of the benefits payable based upon the dental treatment plan.