



FOR GROUPS MORE THAN 5 ELIGIBLE EMPLOYEES

EMPIRE DENTAL OPEN ACCESS - VOLUNTARY

	Option 1	Option 2	Option 3
Diagnostic and Preventive	100%	100%	100%
Basic Services	50%	50%	50%
Endodontics	50%	50%	50%
Periodontics	50%	50%	50%
Oral Surgery	50%	50%	50%
Major Restorative	50%	30%	0%
Prosthetic Repairs and	50%	30%	0%
Prosthetics	50%	30%	0%
Orthodontia	50%*	N/A	N/A
Deductible	\$25	\$50	\$50
Annual Maximum	\$1,000	\$1,000	\$1,000
Lifetime Ortho Maximum	\$500	N/A	N/A
Dependent Ages	19/23 or 23/25	19/23 or 23/25	19/23 or 23/25
Adult Ortho	N/A	N/A	N/A
Waiting Periods	NONE	NONE	NONE

Benefit Description	Timeframes	Comments
Diagnostic and Preventive Services		
Oral Exams	1 exam every 6 months	
Full Mouth x-rays	1 series every 5 years	
Bitewing x-rays	1 series of 4 every 12 months	
Periapical x-rays	4 every 12 months	
Cleanings or Periodontal Maintenance	Once every 6 months	
Topical Fluoride Application	Once every 12 months	Coverage available up to age 19
Basic Services		
Emergency treatment for the relief of pain		
Space maintainers		For missing posterior primary teeth
Sealants	Once per lifetime for permanent molars for children up to age 16	
Restorations		
Amalgams, synthetic porcelain, preformed crowns (up to age 19)		For anterior teeth only
Composite restorations		When given in conjunction with a complex surgical service
Intravenous sedation		
Oral Surgery		
Root Canals (Endodontics)		
Periodontics		
Major Restorative Services		
Crowns, inlays, or onlays		For posterior teeth only
Composite restorations		
Prosthetic Repair and Adjustment		
Prosthetics—Removable and Fixed		
Orthodontics (For groups of 25 or more enrolled employees - Option 1 only)		Coverage available from ages 8 to 18

* Orthodontia only available to groups with enrollment of 25 or more contracts

Note: This plan is available to employees only a) when group originally purchases plan and b) when employee is first eligible. There is no open enrollment. In addition, should a member terminate coverage, it may not be reinstated or repurchased at a later date. Member is ineligible for coverage going forward.

Note: This is a benefits summary only and is subject to terms, conditions, limitations and exclusions set forth in the contract. Failure to comply with our requirements could result in benefit reductions.