



5101 SOUTH COMMERCE DRIVE
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EMIHealth.com

Plan	Advantage	
Network	Advantage Plus Network	Out-of-Network
Type 1 - Preventive Oral Exams, Cleanings, X-rays, Fluoride, Sealants	100%	100% up to MAC*
Type 2 - Basic Fillings, Space Maintainers	50%	50% up to MAC*
Type 3 - Major Crowns, Bridges, Prosthodontics	25%	25% up to MAC*
Type 4 - Orthodontics Dependent children ages 7 through 18	Discount Only	Not Covered
Oral Surgery - (Type 2)	50%	50% up to MAC*
Endodontics - (Type 3)	25%	25% up to MAC*
Periodontics - (Type 3)	25%	25% up to MAC*
Specialists	Member pays same as General Dentists	Member pays same as General Dentists
Waiting periods		
Type 1 - Preventive	None	
Type 2 - Basic	6 Month Waiting Period	
Type 3 - Major	12 Month Waiting Period	
Type 4 - Orthodontics	N/A	
Deductible		
Per Person	\$100.00	
Family Max	\$300.00	
Deductible Applies To	Type 1, Type 2, & Type 3	
Type 3 - Major Annual Maximum Per Person	\$500	
Annual Maximum Per Person	\$1,000	
Orthodontic Lifetime Maximum	N/A	
Provisions / Limitations / Exclusions		
Exams (including Periodontal), Cleanings and Fluoride	2 per year	
Fluoride	Up to age 19	
Sealants	Up to age 19	
Space Maintainers	Up to age 19	
Bitewing X-Rays	Up to 4, twice per year	
Panoramic X-Ray	1 every 3 years	
Impacted Teeth	Covered in Type 2 - Basic	
Anesthesia- (Age 8 and over for the extraction of impacted teeth only)	Covered in Type 3 - Major	
Anesthesia - (For children age 7 and under, once per year)	Covered in Type 3 - Major	
Implants	Not Covered	
Crowns, Pontics, Abutments, Onlays and Dentures	1 every 5 years per tooth	
Fillings on the same surface	1 every 18 months	
*All Services are subject to EMI Health Maximum Allowable Charge (MAC). When using a Non-participating Provider, the insured is responsible for all fees in excess of the Maximum Allowable Charge (MAC).		
Benefits illustrated are in summary only. Refer to your Dental Policy for a complete description of benefits, limitations and exclusions.		
Underwritten by Educators Health Plans Life, Accident and Health, Inc.		