



Schenectady County Active

EMPIRE DENTAL PLAN- Actives

	In Network Options	Out of Network Options
Diagnostic and Preventive	80%	80%
Basic Services	80%	80%
Endodontics	80%	80%
Periodontics	80%	80%
Oral Surgery	80%	80%
Major Restorative	50%	50%
Prosthetic Repairs and Adjustments	50%	50%
Prosthetics	50%	50%
Orthodontia	50%	50%
OON Reimbursement Options		
Deductible Options		None
Annual Maximum Options		None
Lifetime Ortho Maximum		None
Dependent Ages		Children to age 19, 25 if student
Adult Ortho		Covered
Waiting Periods		NONE

Benefit Description	Timeframes	Comments
Diagnostic and Preventive Services		
Oral Exams	No Limit	
Full Mouth x-rays	Once Per Day	
Biting x-rays	Two times in 12 months	
Periapical x-rays	No Limit	
Cleanings/Prophylaxis	Once per day	
Sealants	Not Covered	
Topical Fluoride Application		
Basic Services		
Emergency treatment for the relief of pain		
Space maintainers	Covered through Age 18 on posterior teeth once per lifetime	For missing posterior primary teeth
Restorations		
Amalgam Restorations	Covered once per 12 months	
Posterior Composites	Once per 12 months	
General anesthesia or intravenous sedation	Not Covered	
Oral Surgery		
	Surgical removal of erupted tooth, impacted tooth, residual tooth roots or 3rd molars. Surgical reduction of Fibrous Tuberosity- Covered 1 time per 6 month period.	
Temporomandibular Joint Disorder (TMJ)		
	Not Covered	
Root Canals (Endodontics)		
	Pulpal Therapy, Therapeutic Pulpotomy- patient must be 16 or younger, Root Canal Therapy, covered 1 time per tooth per lifetime	On permanent teeth only- root canals
Prosthetic Repair and Adjustment	Adjustments, relining, or rebasing available after 180 days of initial placement	
Emergency Palliative Treatment	Covered as Basic	
Major Restorative Services		
Pre-fabricated or Stainless Steel Crowns	Covered 1 time per 6 months - no age limit.	
Restorative cast post and core build-up	Once per 60 months	
Dentures, Partials, Crowns, Bridge Replacement and Implants	Once per 60 months	
Dentures, Partials and Bridge Repairs	Covered as Major	
Orthodontics	Covered	

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.