

Dental - Ortho Alternate

Dental Benefits	Met Life		Met Life		Met Life	
	Current- Basic Plan		Current- Advanced Plan		Negotiated Ortho Alt \$3,500	
Deductible						
Individual Maximum	\$1,500	\$1,500	\$1,500	\$1,500	\$1,500	\$1,500
Individual	\$50	\$50	\$50	\$50	\$50	\$50
Family					\$150	\$150
Diagnostic & Preventative Services	Deductible does not apply		Deductible does not apply		Deductible does not apply	
Exams	100%	100%	100%	100%	100%	100%
Sealants	100%	100%	100%	100%	100%	100%
X-rays and Fluoride	100%	100%	100%	100%	100%	100%
Space Maintainers	100%	100%	100%	100%	100%	100%
Basic & Major Services						
Emergency Treatment to relieve pain	80%	80%	80%	80%	80%	80%
Fillings	80%	80%	80%	80%	80%	80%
Endodontics, (surgical and non surgical)	80%	80%	50%	50%	50%	50%
Periodontics, (surgical and non surgical)	80%	80%	80%	80%	80%	80%
Extractions (non-surgical)	80%	80%	80%	80%	80%	80%
Extractions (surgical other than oral surgery)	80%	80%	50%	50%	50%	50%
Crowns, inlays, onlays	0%	0%	50%	50%	50%	50%
Implants	0%	0%	50%	50%	50%	50%
Orthodontic Services						
Coverage coinsurance	0%	0%	50%	50%	50%	50%
Individual lifetime maximum	\$0	\$0	\$1,500	\$1,500	\$3,500	\$3,500
Dependents eligible age	N/A	N/A	19	19	26	26
Adult Ortho	No	No	No	No	No	No
Rate Guarantee	--		--		1 year; 2nd year 6% rate cap	
	Basic	Advanced	Current Rates - Basic Plan		Current Rates - Advanced Plan	
EE	184	78	\$25.56		\$63.01	
EE+ 1	46	64	\$40.94		\$79.61	
Family	71	132	\$66.05		\$126.07	
Monthly Premium			\$11,276		\$26,651	
Annual Premium			\$135,310		\$319,813	
Combined Annual Premium			\$455,123		\$461,264	
\$ Change from Current			--		\$6,141	
% Change from Current			--		1.35%	

Disclaimer: The information provided is confidential and for comparison purposes only. The benefits and rates listed in the proposal will govern.