

Your coverage offers value and access through DentaQuest.

Welcome to Your EmblemHealth Dental Benefits

We're happy to offer your child dental care through EmblemHealth's Child Health Plus (CHPlus) plan. Our goal is to give your child access to high-quality care.

As a member of the EmblemHealth CHPlus plan, your child will:

- Be covered for preventive services like cleanings, x-rays, and exams.
- Be covered for basic services for fillings, root canals, extractions, and periodontal care.

IN-NETWORK COVERAGE

You will be able to choose from our in-network dentists and specialists in New York state. Simply show your child's EmblemHealth member ID card at your dental visit. You do not have out-of-network coverage. If you choose to visit an out-of-network dentist, you will be responsible for the cost.

YOUR DENTAL BENEFITS

Here are some important things to know about your child's benefits:

- Your child's plan does not have a copay, deductible, or out-of-pocket maximum for covered in-network dental care.
- Orthodontic care may be covered for members with severe physically handicapping malocclusions (teeth not properly aligned) as a once-in-a-lifetime benefit for a maximum of three years of active orthodontic care, plus one year of retention care. Retreatment for relapsed cases is not a covered service. Treatment must be approved, and appliances placed and activated prior to the member's 19th birthday. Prior approval for orthodontia is required.



(continued)



EMBLEMHEALTH CHPLUS DENTAL BENEFITS

ATEGORY/PROCEDURE	BENEFIT LIMITATIONS
-network only	
DIAGNOSTIC — Helps to determine your treatment needs.	
ental exam, visits, and consultations	Once within 6-month consecutive period (when primary teeth erupt)
rays, full-mouth x-rays	Once every 36 months
tewing x-rays	Once every 6-12 months
anoramic x-rays	Once every 36 months
ther x-rays	As required (once primary teeth erupt)
PREVENTIVE — Procedures to help prevent oral disease from occurring.	
outine cleaning	Once every 6 months
uoride varnish application	Once every 3 months
ppical fluoride treatment	Once every 3 months
ealants on unrestored permanent molar teeth	Services are covered
nilateral or bilateral space maintainers for normally eveloping permanent teeth	Services are covered
BASIC RESTORATIVE — Routine dental procedures to stabilize oral health.	
lver fillings	Services are covered
hite fillings	Services are covered
ainless steel crowns	Services are covered
ther restorative materials appropriate for children	Services are covered
MAJOR RESTORATIVE — Complex dental procedures to stabilize oral health.	
ENDODONTICS* — Treatment involving the pulp of your tooth.	
rocedures for treatment of diseased pulp chamber and ulp canals, where hospitalization is not required	Services are covered
${\sf ERIODONTICS}^*$ — Prevention and treatment of gum diseas	se.
caling and polishing the teeth	Once every 6 months
ENTURES*	
omplete or partial dentures including six months llow-up care	Services are covered
epair of dentures	Services are covered
ebase/reline of dentures	Services are covered
RAL SURGERY* — Surgical treatment or repair of various	problematic or extreme conditions of the mouth or jaws.
mple tooth extraction	Services are covered
outine dental surgery not requiring hospitalization cluding preoperative and postoperative care	Services are covered
MERGENCY DENTAL CARE	
reatment required to alleviate pain and suffering caused y dental disease or trauma	Services are covered
NESTHESIA — A drug used by a dentist to numb your mou	ith or put you to sleep so no pain is experienced during dental procedures.

^{*}Service requires preauthorization and is covered as long as clinical criteria is met.

The information on this coverage summary should be used only as a guideline for your dental benefits. For detailed information on your plan's terms and conditions, or limitations and exclusions, refer to your contract. If you receive a treatment from an out-of-network dentist, you will not have benefits and you will be billed at the dentist's normal rate.

EmblemHealth Plan, Inc., EmblemHealth Insurance Company, EmblemHealth Services Company, LLC, and Health Insurance Plan of Greater New York (HIP) are EmblemHealth companies. EmblemHealth Services Company, LLC provides administrative services to the EmblemHealth companies.