A LONG HISTORY OF HEALTHY SMILES

EmblemHealth FEDVIP Dental Program for Federal Employees and Retirees — 2014 Coverage
EmblemHealth FEDVIP Dental Program (formally known as GHI FEDVIP Dental Program) is a unique program that was created for federal employees and retirees in 2006. That’s when the federal government was looking for a dental program that provided 100 percent coverage and contained costs for its employees in New York State. FEDVIP’s been there for you ever since.

Unlike many other PPO dental programs, EmblemHealth FEDVIP covers in-network preventive services in full. It also covers out-of-network services from any dentist you choose, just with some out-of-pocket costs. Plus, you have referral-free access to see any network dentist or specialist you choose.

EmblemHealth FEDVIP takes coverage several steps further:

• **Complex procedures are paid at 100 percent** when performed by network dentists.

• All our dentists and specialists meet the **strictest accreditation requirements** around. Not many insurers can say that.

• There are no better in-network benefits available. And we’ve added **even more great new benefits** to your coverage for 2014, all while still keeping your **payroll contribution low**!

• We rank **high in customer satisfaction and loyalty**, because it matters to us that you like your plan.

• We know and respond to your needs better because **we are closer to you**. We live and work in New York, just like you.

We’re proud of our long legacy of unwavering commitment to insuring the federal employees and retirees of New York State. We were here for you yesterday, and we’ll be here for you tomorrow.

Find a dental provider near you. Go to www.emblemhealth.com/find-a-doctor. In the Dental category, choose Federal Employees Dental ( ).
Frequently Asked Questions

Q: Is EmblemHealth FEDVIP the same as the GHI FEDVIP plan I currently have?
A: Yes. GHI FEDVIP was renamed EmblemHealth FEDVIP. It’s the same plan, with enhancements for 2014. If you want to stay in your current plan, you do not need to re-enroll.

Q: What is the EmblemHealth FEDVIP Dental Program?
A: With the EmblemHealth FEDVIP Dental Program, you can purchase valuable dental benefits for yourself and your covered dependents at affordable group rates. The program features a network of general practice and specialist dentists in New York and parts of New Jersey, Connecticut and Pennsylvania.

Q: Do I have to join the GHI FEHB medical program to enroll in the FEDVIP Dental Program?
A: No. FEDVIP is a separate program that you can enroll in independently, no matter what medical coverage you have.

Q: Must I use in-network dentists?
A: Members have the freedom to see any FEDVIP network dentist, without a referral, as well as to receive benefits for covered services from out-of-network dentists. When you receive out-of-network services, you pay the difference between EmblemHealth’s payment and the dentist’s charge, plus any applicable deductibles.

Q: What services are included?
A: The program covers most medically necessary dental procedures — from routine to complex— including surgical extractions, dentures and orthodontia. If you receive those services in network, they are paid in full, up to the applicable annual and lifetime benefit maximums. Out-of-network services are subject to a deductible and any difference between the plan fee schedule and the dentist’s fee.

Q: Are there restrictions or exclusions?
A: The program is subject to annual and lifetime benefit maximums, and small annual deductibles may apply. Members must be enrolled in the program for 12 months before they become eligible for the orthodontia benefit. Certain procedures, such as dental implants, are specifically excluded. For more details, see the EmblemHealth FEDVIP Dental Program Brochure.

Q: Will the government provide me with an employer subsidy for any portion of the premium?
A: No. Federal members must pay the entire cost of the rates for their FEDVIP benefits.

Q: I am enrolled in the GHI FEHB medical program, which provides me with some dental services. How will those services be affected if I enroll in the EmblemHealth FEDVIP Dental Program?
A: If you are enrolled in an FEHB medical program that provides insured dental benefits, that plan will be responsible for providing its dental benefits first. The EmblemHealth FEDVIP Dental Program will provide benefits for any covered services not provided under the medical program after the medical program’s dental benefits have been completely used.

Go to www.emblemhealth.com/category, choose Federal Employees
Coverage That More Than Pays for Itself

Your Low Rates

Compare the high cost of dental services in your region with your low bi-weekly rates below. You’ll see how the dollars you spend for FEDVIP dental benefits can make real sense for you and your family.

<table>
<thead>
<tr>
<th>Enrollment Codes</th>
<th>FEDVIP Dental Program</th>
<th>Bi-weekly Rates</th>
</tr>
</thead>
<tbody>
<tr>
<td>DAG1HS</td>
<td>Self</td>
<td>$18.26</td>
</tr>
<tr>
<td>DAG1HP</td>
<td>Self Plus One</td>
<td>$36.52</td>
</tr>
<tr>
<td>DAG1HF</td>
<td>Self and Family</td>
<td>$54.78</td>
</tr>
</tbody>
</table>

Enhanced Benefits for 2014

EmblemHealth offers you paid-in-full benefits, with no copays or deductibles, for any in-network services. This even includes complex procedures, such as root canals, periodontal procedures, dentures and denture repairs, and surgical extractions including related anesthesia or IV sedation.

What’s more, we’ve raised the annual maximums and rollover limits for your coverage in 2014 and now offer orthodontic coverage for adults and an allowance for implants.

<table>
<thead>
<tr>
<th>Benefit</th>
<th>2014</th>
<th>2013</th>
</tr>
</thead>
<tbody>
<tr>
<td>Annual Maximum</td>
<td>$5,000</td>
<td>$2,500</td>
</tr>
<tr>
<td>Threshold for Rollover Benefits</td>
<td>$2,500</td>
<td>$1,500</td>
</tr>
<tr>
<td>Maximum Rollover In Network</td>
<td>$1,400</td>
<td>$700</td>
</tr>
<tr>
<td>Maximum Rollover Out of Network</td>
<td>$700</td>
<td>$350</td>
</tr>
<tr>
<td>Implant Allowance (Including Crowns)</td>
<td>$1,000</td>
<td>$400</td>
</tr>
</tbody>
</table>

A Dental Network You Can Count On

It’s easy to receive care from our network dentists. You’ll be able to choose from any of our thousands of network dentists and specialists in New York, New Jersey, Pennsylvania and Connecticut without ever needing a referral or to fill out paperwork.

You’ll even be able to receive reimbursement for covered services performed by out-of-network dentists based on the plan’s in-network allowance. Should you choose to receive care from out-of-network dentists, just submit a claim to us. We’ll send you a check for the amount we cover. Please be aware, however, that since we don’t have a payment contract with out-of-network dentists, the amount we pay you will not be the full amount the dentist charged.

An Exceptional Customer Experience

We are creating a customer service experience that is uniquely New York and uniquely EmblemHealth, and we’re proud of where we stand. In fact, we’ve achieved a Net Promoter Score (NPS) of 25 percent — a measure that shows how willing a customer is to recommend our company to family and friends. For the health care industry, the average NPS is only around 12 percent.

Quality Also Counts, Not Just Quantity

Our dental network is fully credentialed. By credentialed, we mean that they meet the requirements of the NCQA—the “Gold Standard” in health plan accreditation. Not every health insurer can say that. We care about the dental care our members get, and we rest a little easier knowing that they are getting care from dentists that meet the toughest quality standards in the nation.
The Benefits That Mean the Most to You
EmblemHealth FEDVIP Dental Program Benefit Summary

| Service area | All of New York
|             | New Jersey counties: Bergen, Essex, Hudson, Middlesex, Monmouth, Morris, Passaic, Somerset, Sussex and Union
|             | Pennsylvania counties: Pike and Monroe
|             | Connecticut counties: Fairfield, Litchfield and New Haven |

Preventive and diagnostic services

| Covers services meant to maintain good dental health, including exams, X-rays, cleanings and fluoride treatments. Two exams and two cleanings per covered person are payable in a calendar year. | Paid in full in-network
|                                                                                           | No copay
|                                                                                           | Deductible applies to out-of-network benefits only |

Intermediate services and periodontal and endodontic services

| Covers fillings, extractions, denture/crown/bridge repair, emergency treatments, oral surgery and anesthesia/IV sedation, and specialist consultations. | Paid in full in-network
|                                                                                           | No copay
|                                                                                           | No deductible for basic services |

Major services

| Covers root canals, crowns, gingivectomy, periodontal surgery, fixed bridgework and dentures. | Paid in full in-network
|                                                                                           | No copay
|                                                                                           | Deductible applies to out-of-network benefits only |

Calendar year deductible

| Applies to intermediate and major services
| In-network
| Out-of-network
| In-network Individual: $0
| Out-of-network Individual: $50
| In-network Family: $0
| Out-of-network Family: $150 |

Annual maximum — per covered member

| $5,000 |

Lifetime orthodontia maximum — per covered member

| $2,000 |

Out-of-network reimbursement

| You pay the difference between our payment and the provider’s charge. | The plan’s Preferred Schedule (Same as in-network schedule) |

For easy access to information about your dental benefits, claim status, benefits eligibility and more, register at emblemhealth.com.

This booklet provides only a summary of covered benefits. Coverage will be subject to all terms, conditions, limitations and exclusions contained in the EmblemHealth FEDVIP Dental Program brochure.
Choosing the dental plan that’s best for you and your loved ones is an important decision.

We encourage you to visit the www.BENEFEDS.com Web site for a comparison between our EmblemHealth FEDVIP Program and your other dental options. We’re confident that you’ll decide to help yourself to the many advantages of the EmblemHealth FEDVIP Dental Program in 2014.

Sign up for the EmblemHealth FEDVIP Dental program today.

Help yourself to a big smile by enrolling in the EmblemHealth FEDVIP Dental Program. It’s easy to do — just log onto the OPM Web site at www.BENEFEDS.com, and select the EmblemHealth FEDVIP dental option. You can also call 1-877-888-3337.

If you’re already in the EmblemHealth FEDVIP Dental Program, you don’t need to do anything. Your coverage will continue automatically.