Dental Pay Plus

Amherst Chamber of Commerce Dental Pay Plus January 1, 2022 - December 31, 2022					
	Dental Pay Plus - Starter		Dental Pay Plus - Level 1		
Deductible	In-Network	Out-of-Network	In-Network	Out-of-Network	
Single	Not Applicable	\$50	Not Applicable	\$50	
Family	Not Applicable	\$150	Not Applicable	\$150	
Annual Maximum					
Per Person	\$1,000	\$1,000	\$1,000	\$1,000	
Routine Exams	100%	80%	100%	80%	
Cleanings	100%	80%	100%	80%	
X-rays	100%	80%	100%	80%	
Fluoride Treatments	100%	80%	100%	80%	
Minor Restorative					
Extractions	80%	50%	80%	50%	
Fillings	80%	50%	80%	50%	
Oral Surgery	80%	50%	80%	50%	
Stainless & acrylic crowns	80%	50%	80%	50%	
Local anesthesia	80%	50%	80%	50%	
Major Restorative					
Endodontics	Not Covered	Not Covered	50%	50%	
Periodontics	Not Covered	Not Covered	50%	50%	
Porcelain crowns	Not Covered	Not Covered	50%	50%	
Bridgework	Not Covered	Not Covered	50%	50%	
Dentures (Placement & Repair)	Not Covered	Not Covered	50%	50%	
General anesthesia	Not Covered	Not Covered	50%	50%	
Orthodontia	Not Covered	Not Covered	Not Covered	Not Covered	
Dependent Coverage	to Age 26	to Age 26	to Age 26	to Age 26	
	Quarterly	Quarterly Premium		Quarterly Premium	
Single	\$16	\$167.02		\$178.39	
Family	\$43	\$438.73		\$448.09	