

NYS Fraternal Order of Police "**Freedom**" Dental Plan 2012

American Dental Plan

vs.

Cigna DMO option

| | 2012 Rates | (Annual) |
|---------------------|-----------------|----------|
| FOP Member | \$89.00 | |
| FOP Member + Family | \$199.00 | |

| | 2012 Rates | (Annual) |
|--------------------------|-----------------|----------|
| FOP Member | \$189.48 | |
| FOP Member + Spouse | \$298.32 | |
| FOP Member + Child (ren) | \$390.36 | |
| FOP Member + Family | \$545.64 | |

- **Referrals** **Not Required**
- **Authorizations** **Not Required**
- **Approvals** **Not Required**

- **Referrals** **Necessary**
- **Authorizations** **Necessary**
- **Approvals** **Necessary**

The American Dental Plan does **NOT** have any deductibles, annual maximums or waiting periods.

There are **no** pre-existing conditions or limitations on family size.

No Pre-Authorizations, Approvals or Referrals needed.

No Exclusions or Limitations.

| American Dental Plan | Cigna DMO option | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|---|---|------------------|-----------------------|------------------|---------------------------|------------------|--|------------------|----------------------------------|------------------|--|---|--|-------------------------|----------------|---------------------------|--------------------|--|------------------|----------------------------------|--|-----------------------|-----------|-----------------------|-----------|--------------------|-----------|-------------------------|-----------|-------------------------|-----------|----------------|-----------|----------------|-----------|----------------|-----------|--------------------|---------|------------------|-----------|
| <p><u>Diagnostic</u></p> <table style="width: 100%; border-collapse: collapse;"> <tr><td>Office Visit</td><td style="text-align: right;">No Charge</td></tr> <tr><td>Oral Exam</td><td style="text-align: right;">No Charge</td></tr> <tr><td>Periodic Oral Exam</td><td style="text-align: right;">No Charge</td></tr> <tr><td>Periapical - first film</td><td style="text-align: right;">No Charge</td></tr> <tr><td>Periapical - each add'l</td><td style="text-align: right;">No Charge</td></tr> <tr><td>Occlusal X-ray</td><td style="text-align: right;">No Charge</td></tr> <tr><td>Bitewing X-ray</td><td style="text-align: right;">No Charge</td></tr> <tr><td>Panoramic film</td><td style="text-align: right;">No Charge</td></tr> <tr><td>Pulp vitality test</td><td style="text-align: right;">No Charge</td></tr> <tr><td>Diagnostic casts</td><td style="text-align: right;">No Charge</td></tr> </table> | Office Visit | No Charge | Oral Exam | No Charge | Periodic Oral Exam | No Charge | Periapical - first film | No Charge | Periapical - each add'l | No Charge | Occlusal X-ray | No Charge | Bitewing X-ray | No Charge | Panoramic film | No Charge | Pulp vitality test | No Charge | Diagnostic casts | No Charge | <p><u>Diagnostic</u></p> <table style="width: 100%; border-collapse: collapse;"> <tr><td>Office Visit</td><td style="text-align: right;">\$5.00</td></tr> <tr><td>Oral Exam</td><td style="text-align: right;">No Charge</td></tr> <tr><td>Periodic Oral Exam</td><td style="text-align: right;">No Charge</td></tr> <tr><td>Periapical - first film</td><td style="text-align: right;">No Charge</td></tr> <tr><td>Periapical - each add'l</td><td style="text-align: right;">No Charge</td></tr> <tr><td>Occlusal X-ray</td><td style="text-align: right;">No Charge</td></tr> <tr><td>Bitewing X-ray</td><td style="text-align: right;">No Charge</td></tr> <tr><td>Panoramic film</td><td style="text-align: right;">No Charge</td></tr> <tr><td>Pulp vitality test</td><td style="text-align: right;">\$13.00</td></tr> <tr><td>Diagnostic casts</td><td style="text-align: right;">No Charge</td></tr> </table> | Office Visit | \$5.00 | Oral Exam | No Charge | Periodic Oral Exam | No Charge | Periapical - first film | No Charge | Periapical - each add'l | No Charge | Occlusal X-ray | No Charge | Bitewing X-ray | No Charge | Panoramic film | No Charge | Pulp vitality test | \$13.00 | Diagnostic casts | No Charge |
| Office Visit | No Charge | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Oral Exam | No Charge | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Periodic Oral Exam | No Charge | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Periapical - first film | No Charge | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Periapical - each add'l | No Charge | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Occlusal X-ray | No Charge | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Bitewing X-ray | No Charge | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Panoramic film | No Charge | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Pulp vitality test | No Charge | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Diagnostic casts | No Charge | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Office Visit | \$5.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Oral Exam | No Charge | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Periodic Oral Exam | No Charge | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Periapical - first film | No Charge | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Periapical - each add'l | No Charge | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Occlusal X-ray | No Charge | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Bitewing X-ray | No Charge | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Panoramic film | No Charge | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Pulp vitality test | \$13.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Diagnostic casts | No Charge | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <p><u>Preventive</u></p> <table style="width: 100%; border-collapse: collapse;"> <tr><td>Prophylaxis adult/child</td><td style="text-align: right;">No Charge</td></tr> <tr><td>Fluoride Treatment</td><td style="text-align: right;">No Charge</td></tr> <tr><td>Sealant</td><td style="text-align: right;">No Charge</td></tr> <tr><td>Space maint - fixed unilateral</td><td style="text-align: right;">No Charge</td></tr> <tr><td>Space maint - fixed bilateral</td><td style="text-align: right;">No Charge</td></tr> </table> | Prophylaxis adult/child | No Charge | Fluoride Treatment | No Charge | Sealant | No Charge | Space maint - fixed unilateral | No Charge | Space maint - fixed bilateral | No Charge | <p><u>Preventive</u></p> <table style="width: 100%; border-collapse: collapse;"> <tr><td>Prophylaxis adult/child</td><td style="text-align: right;">No Charge</td></tr> <tr><td>Fluoride Treatment</td><td style="text-align: right;">No Charge</td></tr> <tr><td>Sealant</td><td style="text-align: right;">\$11.00</td></tr> <tr><td>Space maint - fixed unilateral</td><td style="text-align: right;">\$105.00</td></tr> <tr><td>Space maint - fixed bilateral</td><td style="text-align: right;">\$165.00</td></tr> </table> | Prophylaxis adult/child | No Charge | Fluoride Treatment | No Charge | Sealant | \$11.00 | Space maint - fixed unilateral | \$105.00 | Space maint - fixed bilateral | \$165.00 | | | | | | | | | | | | | | | | | | | | |
| Prophylaxis adult/child | No Charge | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Fluoride Treatment | No Charge | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Sealant | No Charge | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Space maint - fixed unilateral | No Charge | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Space maint - fixed bilateral | No Charge | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Prophylaxis adult/child | No Charge | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Fluoride Treatment | No Charge | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Sealant | \$11.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Space maint - fixed unilateral | \$105.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Space maint - fixed bilateral | \$165.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <p><u>Restorative</u></p> <table style="width: 100%; border-collapse: collapse;"> <tr><td>Silver filling - Simple</td><td style="text-align: right;">\$50.00</td></tr> <tr><td>Amalgam - 2 surface</td><td style="text-align: right;">\$67.00</td></tr> <tr><td>Amalgam - 3 surface</td><td style="text-align: right;">\$82.00</td></tr> <tr><td>White filling - Simple</td><td style="text-align: right;">\$50.00</td></tr> <tr><td>Composite - 2 surface</td><td style="text-align: right;">\$73.00</td></tr> <tr><td>Composite - 3 surface</td><td style="text-align: right;">\$87.00</td></tr> </table> | Silver filling - Simple | \$50.00 | Amalgam - 2 surface | \$67.00 | Amalgam - 3 surface | \$82.00 | White filling - Simple | \$50.00 | Composite - 2 surface | \$73.00 | Composite - 3 surface | \$87.00 | <p><u>Restorative</u></p> <table style="width: 100%; border-collapse: collapse;"> <tr><td>Silver filling - Simple</td><td style="text-align: right;">No Charge</td></tr> <tr><td>Amalgam - 2 surface</td><td style="text-align: right;">No Charge</td></tr> <tr><td>Amalgam - 3 surface</td><td style="text-align: right;">No Charge</td></tr> <tr><td>White filling - Simple</td><td style="text-align: right;">No Charge</td></tr> <tr><td>Composite - 2 surface</td><td style="text-align: right;">No Charge</td></tr> <tr><td>Composite - 3 surface</td><td style="text-align: right;">No Charge</td></tr> </table> | Silver filling - Simple | No Charge | Amalgam - 2 surface | No Charge | Amalgam - 3 surface | No Charge | White filling - Simple | No Charge | Composite - 2 surface | No Charge | Composite - 3 surface | No Charge | | | | | | | | | | | | | | | | |
| Silver filling - Simple | \$50.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Amalgam - 2 surface | \$67.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Amalgam - 3 surface | \$82.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| White filling - Simple | \$50.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Composite - 2 surface | \$73.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Composite - 3 surface | \$87.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| White filling - Simple | No Charge | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Composite - 2 surface | No Charge | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Composite - 3 surface | No Charge | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <p><u>Crowns & Fixed Bridges</u></p> <table style="width: 100%; border-collapse: collapse;"> <tr><td>Crown-porcelain fused to high noble metal</td><td style="text-align: right;">\$490.00</td></tr> <tr><td>Stainless steel crown</td><td style="text-align: right;">\$99.00</td></tr> <tr><td>Prefabricated resin crown</td><td style="text-align: right;">\$99.00</td></tr> <tr><td>Pontic-porcelain fused to high noble metal</td><td style="text-align: right;">\$490.00</td></tr> <tr><td>Crown-full cast high noble metal</td><td style="text-align: right;">\$490.00</td></tr> </table> | Crown-porcelain fused to high noble metal | \$490.00 | Stainless steel crown | \$99.00 | Prefabricated resin crown | \$99.00 | Pontic-porcelain fused to high noble metal | \$490.00 | Crown-full cast high noble metal | \$490.00 | <p><u>Crowns & Fixed Bridges</u></p> <table style="width: 100%; border-collapse: collapse;"> <tr><td>Crown-porcelain fused to high noble metal</td><td style="text-align: right;">\$450.00</td></tr> <tr><td>Stainless steel crown</td><td style="text-align: right;">\$100.00</td></tr> <tr><td>Prefabricated resin crown</td><td style="text-align: right;">\$130.00</td></tr> <tr><td>Pontic-porcelain fused to high noble metal</td><td style="text-align: right;">\$450.00</td></tr> <tr><td>Crown-full cast high noble metal</td><td style="text-align: right;">\$450.00</td></tr> </table> | Crown-porcelain fused to high noble metal | \$450.00 | Stainless steel crown | \$100.00 | Prefabricated resin crown | \$130.00 | Pontic-porcelain fused to high noble metal | \$450.00 | Crown-full cast high noble metal | \$450.00 | | | | | | | | | | | | | | | | | | | | |
| Crown-porcelain fused to high noble metal | \$490.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Stainless steel crown | \$99.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Prefabricated resin crown | \$99.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Pontic-porcelain fused to high noble metal | \$490.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Crown-full cast high noble metal | \$490.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Stainless steel crown | \$100.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Prefabricated resin crown | \$130.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Crown-full cast high noble metal | \$450.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

NYS Fraternal Order of Police "Freedom" Dental Plan 2012

American Dental Plan

vs.

Cigna DMO option

| <u>Endodontics</u> | <u>Endodontics</u> |
|--|--|
| Pulp cap direct No Charge | Pulp cap direct \$13.00 |
| Therapeutic pulpotomy No Charge | Therapeutic pulpotomy \$68.00 |
| Root Canal- Anterior \$250.00 | Root Canal- Anterior \$210.00 |
| Root Canal- Bicuspid \$300.00 | Root Canal- Bicuspid \$245.00 |
| Root Canal- Molar \$400.00 | Root Canal- Molar \$335.00 |
| Apicoectomy - Anterior \$199.00 | Apicoectomy - Anterior \$260.00 |
| Apicoectomy - Bicuspid \$199.00 | Apicoectomy - Bicuspid \$290.00 |
| Apicoectomy - Molar \$299.00 | Apicoectomy - Molar \$320.00 |
| <u>Periodontics</u> | <u>Periodontics</u> |
| Periodontal scaling No Charge | Periodontal scaling \$83.00 |
| Periodontal maintenance procedure No Charge | Periodontal maintenance procedure \$50.00 |
| Gingivectomy or gingivoplasty per tooth \$99.00 | Gingivectomy or gingivoplasty per tooth \$170.00 |
| Crown lengthening \$350.00 | Crown lengthening \$240.00 |
| Osseous surgery 1 to 4 teeth \$300.00 | Osseous surgery 1 to 4 teeth \$225.00 |
| <u>Oral Surgery</u> | <u>Oral Surgery</u> |
| Surgical Extraction \$199.00 | Surgical Extraction \$50.00 |
| Soft Tissue Impact Extraction \$99.00 | Soft Tissue Impact Extraction \$43.00 |
| Partial Bony Extraction \$199.00 | Partial Bony Extraction \$88.00 |
| Biopsy of hard tissue \$104.00 | Biopsy of hard tissue \$74.00 |
| Biopsy of soft tissue \$84.00 | Biopsy of soft tissue \$62.00 |
| Alveoplasty with extraction - quad \$70.00 | Alveoplasty with extraction - quad \$55.00 |
| <u>Dentures</u> | <u>Dentures</u> |
| Replace missing or broken teeth No Charge | Replace missing or broken teeth \$72.00 |
| Repair broken complete denture base No Charge | Repair broken complete denture base \$84.00 |
| Adjust complete denture up or low No Charge | Adjust complete denture up or low \$43.00 |
| Complete upper or lower denture \$560.00 | Complete upper or lower denture \$625.00 |
| Immediated upper or lower denture \$560.00 | Immediated upper or lower denture \$625.00 |
| Repair or replace broken clasp \$130.00 | Repair or replace broken clasp \$105.00 |
| Reline complete upper or lower (office) \$120.00 | Reline complete upper or lower (office) \$135.00 |
| <u>Miscellaneous</u> | <u>Miscellaneous</u> |
| Teeth Whitening \$199.00 | Teeth Whitening \$175.00 |
| <u>Orthodontics</u> | <u>Orthodontics</u> |
| Orthodontic evaluation and consultation No Charge | Orthodontic evaluation and consultation \$0.00 |
| At time of banding \$250.00 | At time of banding \$515.00 |
| At time of records \$250.00 | At time of records ????????? |
| Periodic orthodontic treatment \$99.00 | Periodic orthodontic treatment \$85.00 |
| <u>Implants</u> | <u>Implants</u> |
| Implant (Surgery & Implant) \$890.00 | Implant (Surgery & Implant) Not Covered |
| Abutment Placement \$190.00 | Abutment Placement \$790.00 |
| Crown for Implant \$690.00 | Crown for Implant \$750.00 |

23 services covered at **NO CHARGE**

16 services covered at **NO CHARGE**

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 There are **no** pre-existing conditions or limitations on family size.
No Pre-Authorizations, Approvals or Referrals needed.
No Exclusions or Limitations.