

Dental Blue Options benefits

Prepared for St. Lawrence County Chamber of Commerce

11/19/2008

| Type of Care/Plan Benefits | In-Network | Out Of Network |
|--|---|---|
| <ul style="list-style-type: none"> • Fixed prosthetics • Removable prosthetics • Inlays / Onlays / Crowns • Relines / rebases • Implants <p>Class IV - Orthodontia</p> <ul style="list-style-type: none"> • Class IV - Coinsurance • Braces | <ul style="list-style-type: none"> • Not covered • Not covered • Not covered • Not covered • Not covered <ul style="list-style-type: none"> • Not covered • Not covered | <ul style="list-style-type: none"> • Not covered • Not covered • Not covered • Not covered • Not covered <ul style="list-style-type: none"> • Not covered • Not covered |

*Must be supplied by a participating provider.

This is not a contract. It is intended to highlight the coverage of this program. Benefits are determined by the terms of the contract. All benefits are subject to medical necessity. 11/19/2008