DMS Dental Plan Overview Town of Norton Actives

	DMS Network Plan	Altus Low Plan Actives	Altus High Plan Actives
Deductible	**$10 co payment per visit**	**$50/$150**	**$50/$150**
Benefit year maximum	None	$1000	**$2,000**
Dentist Availability	**DMS Network**	**Any Dentist**	**Any Dentist**
PREVENTIVE	100%	100% No Deductible	100% No Deductible
Oral Exams	100%	100%	100%
Prophylaxis (cleaning)	100%	100%	100%
Flouride	Up to Age 14	Up to age 19	Up to age 19
Sealants	Up to Age 14	Up to Age 16	Up to Age 16
X-Rays	100%	100%	100%
Basic		**80% Deductible Applies**	**80% Deductible Applies**
Amalgam fillings (silver)	100%	80%	80%
Composite (white fillings)	Front Teeth only	80% All Teeth	80% All Teeth
Space Maintainers	50%	100%	100%
Periodontics	50%	80%	50%
Endodontics	50%	80%	80%
Extractions/ Routine Oral Surgery	50%	80%	50%
Denture Repairs	50%	80%	80%
Rebase Reline Dentures	50%	80%	80%
Major	50%	**Not covered**	**50% - 12 Month Wait**
Implant	**Not Covered**	**Not covered**	**50% - 12 Month Wait**
Crown	50%	**Not covered**	**50% - 12 Month Wait**
Bridges/Dentures	50%	**Not covered**	**50% - 12 Month Wait**
Orthodontics	Discounted Plan	**Not covered**	**Not covered**
Dependents	19/25	Dependent Children up until end of month they turn 21	
		Dependent children who are full time students up to age 26.	
	Based on 24 Deductions		
Employee Only	$10.50	$19.98	$24.80
Employee Plus One	$20.70	$38.30	$47.59
Full Family	$29.80	$55.21	$68.62
	This is a brief overview- see plan description for limitations and exclusions		
rev 7/1/2016 lsk		1-800-456-8715 for more information	