

Dental Policy Comparison Chart

Covered Services	Policy 1	Policy 2	Policy 3
Company			
Is this a PPO, HMO or other?			
Preventative Services			
Routine 6-month exam			
Emergency oral exams			
Dental x-rays (full mouth, bitewing, and others).			
How often are these covered?			
Sealants			
Other			
Restorative Services			
Extractions			
Oral surgery			
Fillings			
Endodontic treatment (including root canals)			
Repair of crowns, inlays, onlays, bridgework or dentures			
Other			
Major Services			
Bridgework installation			
Partial or full denture installation			
Complete bridgework or denture replacement			
Other			
Maximum Lifetime Benefit			
Yearly Deductible Per Individual			
Yearly Deductible Per Family			
Monthly Premium			