

2027 VA: Advantage Copay

Take advantage of more savings.

What is the Advantage Copay Plan?

EMI Health's Advantage Copay Plan is, as the name suggests, a copay plan. This means you have a fixed copay cost for covered dental services and procedures. You can know exactly how much a service or procedure will cost before you visit the dentist with the copay schedule.

Search Advantage-A network providers using our provider search here: [Provider Search](#)

Plan Summary		Advantage-A Network	Out-of-Network
Services			
Preventive Oral Exams, Cleanings, Sealants, X-rays, Fluoride		100%	See Co-Pay Schedule
Basic Fillings, Space Maintainers, Oral Surgery		See Co-Pay Schedule	
Major Crowns, Bridges, Prosthodontics, Endodontics, Periodontics			
Orthodontics Children (up to age 19*) Medically Necessary / Non-Medically Necessary		50% / Not Covered	50% / Not Covered
Waiting Periods			
Preventive		None	
Basic		6 Month Waiting Period	
Major		12 Month Waiting Period	
Orthodontics Medically Necessary / Non-Medically Necessary		None / Not Applicable	
Deductible (applies to Preventive, Basic,and Major)			
Individual		\$50	
Family Max†		\$150	
Maximums			
Major Annual Max		No Maximum	
Annual Max per Person		No Maximum	
Orthodontic Lifetime Max Medically Necessary / Non-Medically Necessary		No Maximum / Not Applicable	
Pediatric EHB Annual Max		No Maximum	
Pediatric Individual EHB Out-of-Pocket Max		\$450	
Pediatric Family EHB Out-of-Pocket Max†		\$900	

Benefits illustrated are in summary only. Refer to your Dental Policy for a complete description of benefits, limitations and exclusions. All Services are subject to EMI Health Maximum Allowable Charge (MAC). When using a Non-participating Provider, the insured is responsible for all fees in excess of the MAC. Underwritten by Educators Health Plans Life, Accident & Health.

*Through the last day of the month in which the Insured turns 19 years of age

†For enrollment groups with two or more individuals, the per person deductible will apply up until the combined accumulated deductible reaches the family max, and the individual EHB Out-of-Pocket Maximum will apply up until the combined accumulated Pediatric EHB out-of-pocket costs reaches the Pediatric Family EHB Out-of-Pocket Maximum.