

Illinois Advantage Copay Dental Plan

What is the Advantage Copay Dental Insurance Plan?

The Companion Life EMI Health 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 network providers using our provider search here: [Provider Search](#)

Plan Summary	Advantage 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		
Orthodontics (Medically Necessary) (up to age 19*)	50%	50%
Orthodontics (Non-Medically Necessary) (up to age 19*)	Discount Only	Not Covered
Waiting Periods		
Preventive	None	
Basic (age 19 and older)	6 Month Waiting Period	
Major (age 19 and older)	12 Month Waiting Period	
Orthodontics (Medically Necessary)	None	
Orthodontics (Non-Medically Necessary)	N/A	
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)	No Maximum	
Orthodontic Lifetime Max (Non-Medically Necessary)	N/A	
Pediatric EHB Annual Max	No Maximum	
Pediatric Individual EHB Out-of-Pocket Max	\$425	
Pediatric Family EHB Out-of-Pocket Max	\$850	

Insurance plans may not be available in all states and may vary by state. These insurance policies have limitations, exclusions, reduction of benefits, and terms under which the policy may be continued in force or discontinued. For costs and complete details of coverage please call (800)662-5851. 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 Table of Allowances. Co-Pays/Claim Payments are subject to change January 1st of each year. *Through the last day of the month in which the Insured turns 19 years of age. †Coverage limited to children meeting or exceeding a score of 42 from the Modified Salzmann Index or meeting criteria for medical necessity.

Underwritten by Companion Life Insurance Company.
EMIH.IL.ID.ADV COPAY.MKT.25

For Policy Number: EMIH.IL.ID.ADV COPAY.POL.25