

Group: Morrison Education dba Sun Valley Academy (Plan #5655)

Plan: Summit Plus Indemnity

Underwritten & Administered by: EMI Health

Plan Type: Voluntary / Fully Insured

Effective Date: 8/1/2024
Benefit Year: Calendar

	In-Network	Out-of-Network
Type 1 - Preventive Oral Exams, Cleanings, X-rays, Fluoride	100%	100% up to R&C
Type 2 - Basic Fillings, Oral Surgery	90%	90% up to R&C
Type 3 - Major Crowns, Bridges, Prosthodontics	60%	60% up to R&C
Type 4 - Orthodontics Dependent children ages 7 through 18	No Coverage	No Coverage
Endodontics	Type 2 - Basic	Type 2 - Basic
Periodontics	Type 2 - Basic	Type 2 - Basic
Sealants	Type 1 - Preventive	Type 1 - Preventive
Space Maintainers	Type 1 - Preventive	Type 1 - Preventive
Waiting periods	71	7 1
Type 2 - Basic	No	ne
Type 3 - Major	None	
Type 4 - Orthodontics	N/A	
Deductible	In and Out of Network Deductibles are Combined	
Per Person	\$50.00	
	\$150.00	\$50.00 \$150.00
Family Max Deductible Applies To	Type 2 & Type 3	Type 2 & Type 3
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Annual Maximum Per Person	\$2,50	
Orthodontic Lifetime Maximum	N /	' A
Network / Reimbursement Schedule	Summit Plus	R & C (90th)
Monthly Rates		
Employee	\$50.30	
Employee + Spouse	\$105.00	
Employee + Child(ren)	\$109.70	
Employee + Spouse + Child(ren)	\$169	9.60
Provisions / Limitations / Exclusions		
Exams (including Periodontal), Cleanings and Fluoride		2 per year
Fluoride		Up to age 16
Sealants		Up to age 16
Space Maintainers		Up to age 16
Bitewing X-Rays		Up to 4, twice per year
Periapical X-Rays		6 per year
Panoramic X-Ray		1 every 3 years
Impacted Teeth Anesthesia - (Age 8 and over for the extraction of impacted teeth only)		Covered in Type 2 - Basic Covered in Type 3 - Major*
Anesthesia - (Age 8 and over 101 the extraction of impacted teeth only) Anesthesia - (For children age 7 and under, once per year)		Covered in Type 3 - Major Covered in Type 3 - Major*
Implants / Implant Abutments		Covered in Type 3 - Major
Crowns, Pontics, Abutments, Onlays and Dentures Fillings on the same surface		1 every 5 years per tooth 1 every 18 months
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-	only Refer to your certificate for a complete description of bo	nofite limitations and evolusions
Benefits illustrated are in summary	only. Refer to your certificate for a complete description of be or, the insured is responsible for all fees in excess of the Reaso	