## **Comprehensive Dental with Orthodontia**

Lifetime Maximum Benefit (per eligible dependent\*) \$1500

Procedure	Reimbursement Amount
Diagnosis, construction and Insertion of appliances	\$240
Active Treatment Plan	
Monthly payment (21 months)	\$60
Maximum for Active Treatment	\$1,260

This benefit must be bargained into your collective bargaining agreement. Please refer to your collective bargaining agreement for specific details on what coverage you are eligible for or contact SEBF at 315-218-6513.

<sup>\*</sup>Benefits are available only to eligible dependent children up to age 19.