

ADP & OHS Dental Plans

AMERICAN DENTAL PLAN (ADP) Now known as CompBenefits		ORAL HEALTH SERVICES (OHS) Now known as CompBenefits	
Limited to Participating Dentists in Private Practice		Limited to Participating Dentists in Private Practice	
No Maximum No Deductible		No Maximum No Deductible	
STANDARD You Pay* No Charge No Charge No Charge No Charge (Once every 6 months) No Charge 7.00 35.00	ENRICHED You Pay No Charge No Charge No Charge No Charge (Once every 6 months) No Charge 7.00 35.00	STANDARD You Pay No Charge No Charge No Charge No Charge (Once every 6 months) No Charge 6.00 40.00	ENRICHED You Pay No Charge No Charge No Charge No Charge (Once every 6 months) No Charge No Charge No Charge
UCR Less 25% UCR Less 25% UCR Less 25% UCR Less 25%	12.00 20.00 25.00 UCR less 25%	10.00 18.00 23.00 60.00	No Charge No Charge No Charge 60.00
95.00 135.00 175.00 65.00	95.00 135.00 175.00 65.00	90.00 155.00 200.00 75.00	45.00 90.00 145.00 65.00
No Charge No Charge 20.00	No Charge No Charge 20.00	No Charge No Charge 15.00	No Charge No Charge No Charge
37.50 105.00 UCR Less 25%	37.50 105.00 35.00	40.00 120.00 25.00	40.00 90.00 25% Discount
35.00 185.00** 200.00**	35.00 185.00** 200.00**	25.00 \$210.00* \$210.00*	No Charge \$175.00* \$175.00*
185.00** 200.00**	185.00** 200.00**	25% Discount 25% Discount	25% Discount 25% Discount
200.00 200.00 250.00	200.00 200.00 250.00	230.00 230.00 275.00	205.00 205.00 240.00
No Charge UCR Less 25% UCR Less 25% UCR Less 25% UCR Less 25% Additional	No Charge 35.00 250.00 1400.00 1950.00 Additional	25% Discount 25% Discount 25% Discount 25% Discount 25% Discount	No Charge 25.00 200.00 1,400.00 1,950.00 25% Discount
Not Covered Not Covered Not Covered Not Covered Not Covered Not Covered Not Covered	Not Covered Up to 50% off doctor's prices Up to 50% off doctor's prices Up to 50% off doctor's prices Up to 50% off doctor's prices Up to 50% off doctor's prices Up to 50% off doctor's prices	Not Covered Not Covered Not Covered Not Covered Not Covered Not Covered Not Covered	10% Discount 20% Discount 20% Discount 20% Discount 20% Discount 20% Discount 20% Discount

* STD Plan fee apply to participating General Dentist only.

** Co-payments are exclusive of gold.

* Cost of high noble metal additional.