

<b>DENTAL PLAN COMPARISON</b>			
	<b>DENTAL EXPENSE PLAN</b>		<b>DENTAL PLAN ORGANIZATION (DPO)</b>
	<b>IN-NETWORK</b>	<b>OUT-OF-NETWORK</b>	
<b>Deductible</b>			
<b>Coinsurance</b>			
<b>Copayments</b>			
<b>Provider Limitations</b>			

<b>DENTAL PLAN COMPARISON</b>			
	<b>DENTAL EXPENSE PLAN</b>		<b>DENTAL PLAN ORGANIZATION (DPO)</b>
	<b>IN-NETWORK</b>	<b>OUT-OF-NETWORK</b>	
<b>Tooth Sealants</b>			
<b>Routine Fillings</b>			
<b>Crowns</b>			
<b>Root Canal (Endodontics)</b>			
<b>Dentures</b>			
<b>Oral Surgery for Removal of Impact-</b>			