



C

E

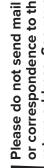
20150

20140

20125

2012

New York State Department of Civil Service Employee Benefits Division P.O. Box 1068 Schenectady, New York 12301-1068 www.cs.ny.gov



or correspondence to the return address. See reverse for address information.

() PE0161



### June 2019 Dental and

# Vision Benefits

For individuals enrolled in the New York State Dental Plan and/or New York State Vision Plan through a NYSHIP Participating Employer (PE), their enrolled dependents and COBRA enrollees





### **EmblemHealth Preferred Premier Dental Plan**

## Effective June 1, 2019, the following enhancements will be provided under the Preferred *Premier* Dental Plan

- Annual maximum benefit increases to \$3,000. The annual maximum benefit was previously \$2,000.
- Maximum lifetime orthodontic benefit per covered dependent increases to \$3,000. The maximum lifetime orthodontic benefit was previously \$1,998.
- All composite (white) fillings and certain upgraded materials are now covered.
- Dental implants are now covered, subject to a \$600 limitation per implant.
- Coinsurance has been eliminated for services rendered by a non-participating provider; non-participating provider services will be reimbursed per the June 1, 2019, EmblemHealth Preferred Dental allowance schedule.

If you have questions about your dental benefits, call EmblemHealth (underwritten by GHI) at 1-800-947-0101. **New ID cards have been mailed to enrollees.** 

### **New York State Vision Plan** Administered by Davis Vision

#### Effective June 1, 2019

- Ultra/Digital progressive lenses from participating providers are now covered, subject to a \$90 copayment.
- Contact lens wearers are now eligible for one exam per year, provided their last contact lens purchase was covered by the Vision Plan. This does not apply to enrollees who received eyeglasses or an exam only during their 24-month eligibility cycle.

If you have questions about your vision benefits, call Davis Vision at 1-888-588-4823.

