

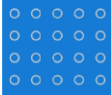
Carnegie Mellon University Student Health Plan | Effective 08/01/2026

This comparison summarizes the Pediatric Dental benefit embedded in the CMU Student Medical Plan (Group 10566504) alongside the standalone Blue Edge Dental Preferred plan (Group 10566604), highlighting where the two benefit structures differ.

### Plan Comparison at a Glance

Benefit Feature	Pediatric Dental (Medical Plan EHB)	Adult Dental (Blue Edge Dental Preferred)
<b>Who it covers</b>	Dependents/members under age 19 only; ends at end of Benefit Period in which member turns 19	All covered members/students — no age restriction
<b>Network</b>	United Concordia Advantage Network only — no out-of-network benefit (Not Covered)	In-Network (Elite Plus) or Out-of-Network (90th Percentile), both paid at different %
<b>Deductible</b>	None	In-Network: \$100/\$300 (Ind/Family), waived for Class I. Out-of-Network: \$125/\$375
<b>Annual/Benefit Period Maximum</b>	None stated (ACA Essential Health Benefit)	\$1,000 per member per Benefit Period
<b>Preventive Services (exams, cleanings, x-rays, fluoride, sealants, space maintainers, emergency palliative)</b>	100%, no deductible (network only)	100% in-network / 80% out-of-network (Class I)
<b>Basic Services (fillings, non-surgical/surgical periodontics, extractions, oral surgery, anterior/bicuspid endo)</b>	“Other Pediatric Dental Services”: 50%, no deductible	80% in-network / 70% out-of-network (Class II)
<b>Major Services (crowns, inlays/onlays, molar root canals, bridges/dentures, osseous surgery, bony impactions, general anesthesia)</b>	Same bucket as above: 50%, no deductible	50% in-network / 50% out-of-network (Class III)
<b>Orthodontics</b>	Covered only for severe dentofacial abnormality; requires precertification; cosmetic ortho excluded	Not Covered
<b>Implants</b>	Not addressed as a distinct pediatric benefit; generally excluded	Not Covered





## Key Differences at a Glance

- **Network flexibility:** The adult plan allows out-of-network care at a reduced payment %; pediatric dental has no out-of-network coverage at all.
- **Cost-sharing structure:** Pediatric dental has no deductible and no annual dollar cap. The adult plan has both a deductible (\$100–\$375 depending on network) and a \$1,000/year cap.
- **Coinsurance model:** Pediatric dental uses a simple two-tier split — preventive at 100%, everything else at 50%. The adult plan uses a three-tier (Class I/II/III) structure with intermediate 80%/70% coverage for basic services.
- **Orthodontics:** Pediatric dental provides limited, medically-necessary-only orthodontic coverage (with precertification). The adult plan excludes orthodontics entirely.
- **Eligibility:** Pediatric dental only applies to covered dependents/members under 19; the adult dental plan applies to everyone and is the primary dental option for the covered student population.

*This is a summary for comparison purposes only. Refer to the full Certificate of Coverage and Summary of Benefits for complete terms, exclusions, and limitations — those documents govern in the event of any conflict.*

