



Addendum E.3 - Dental Plan by County - Individual Exchange

Applicant Name:

Instructions: Place an x in each box indicating each product you will offer in each county. If you are proposing to enter a new county in 2016, highlight the row in yellow indicating the new county. If you are proposing to offer a new product for 2016 (i.e. a new non-standard product), highlight the column indicating the new product.

	Pediatric Dental	Additional Dental 1	Additional Dental 2
Albany			
Allegany			
Bronx			
Broome			
Cattaraugus			
Cayuga			
Chautauqua			
Chemung			
Chenango			
Clinton			
Columbia			
Cortland			
Delaware			
Dutchess			
Erie			
Essex			
Franklin			
Fulton			
Genesee			
Greene			
Hamilton			
Herkimer			
Jefferson			
Kings			
Lewis			
Livingston			
Madison			
Manhattan			
Monroe			
Montgomery			



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	Pediatric Dental	Additional Dental 1	Additional Dental 2
Nassau			
Niagara			
Oneida			
Onondaga			
Ontario			
Orange			
Orleans			
Oswego			
Otsego			
Putnam			
Queens			
Rensselaer			
Richmond			
Rockland			
Saratoga			
Schenectady			
Schoharie			
Schuyler			
Seneca			
St. Lawrence			
Steuben			
Suffolk			
Sullivan			
Tioga			
Tompkins			
Ulster			
Warren			
Washington			
Wayne			
Westchester			



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	Pediatric Dental	Additional Dental 1	Additional Dental 2
Wyoming			
Yates			