



All plans offered and underwritten by Kaiser Foundation Health Plan of the Northwest, 500 NE Multnomah St., Suite 100, Portland, OR 97232

## Summary of dental benefits

Clackamas County 1183  
 Oregon Dental Plan C  
 January 1, 2012 through December 31, 2012

<b>Benefit Maximum</b>	None
	<b>You Pay</b>
<b>Dental Office Visit Charge</b> – Applies to all visits	\$5
<b>Deductible</b> (applies to all services unless otherwise indicated)	
For one Member	\$0
For an entire Family	\$0
<b>Preventive and Diagnostic Services</b> (oral exam, x-rays, teeth cleaning, fluoride) (Not subject to the Deductible or counted towards the Benefit Maximum)	No additional charge
<b>Basic Restorative Services</b> (routine fillings, simple extractions)	No additional charge
<b>Oral Surgery Services</b> (surgical tooth extractions)	No additional charge
<b>Periodontics</b> (treatment of gum disease, scaling and root planing)	No additional charge
<b>Endodontics</b> (root canal therapy)	No additional charge
<b>Major Restoration Services</b> (crowns, bridges)	\$45 for each
<b>Emergency Care</b>	
From Dental Group Providers	\$25 for Emergency Care and Urgent Care visits on the same or next business day plus any other Charges that normally apply.
From non-Dental Group providers	All Charges over \$100
<b>Nitrous oxide</b>	
Adults and children age 13 years and older	\$15
Children age 12 years and younger	\$0
<b>Orthodontics</b>	Members age 17 years and younger: 50% of Charges up to Lifetime Benefit Maximum of \$2,000, and 100% of Charges thereafter. Members age 18 years and older: 50% of Charges up to Lifetime Benefit Maximum of \$2,000, and 100% of Charges thereafter.

## Exclusions and Limitations

### Exclusions

- Conditions for which Service or reimbursement is required by law to be provided at or by a government agency.
- Cosmetic Services.
- Dental implants unless coverage for dental implants as an additional benefit has been purchased.
- Experimental or investigational treatments.
- Full mouth reconstruction and occlusal rehabilitation.

- Genetic testing.
- Medical or Hospital Services, unless otherwise specified in this *Summary*.
- Missed appointment fees.
- Non-Orthodontic recording of jaw movements or positions.
- Orthodontic Services unless orthodontic coverage as an additional benefit has been purchased.
- Prescription drugs obtainable with or without a prescription.
- Prosthetic devices following your decision to have a tooth (or teeth) extracted for nonclinical reasons or when a tooth is restorable.
- Replacement of prefabricated, noncast crowns, including noncast stainless steel crowns.
- Restorative or reconstructive treatment for specific congenital or developmental malformations.
- Sedation and general anesthesia are not covered, except when administered pursuant to the Nitrous Oxide benefit as described in the “Other Benefits” section of your EOC.
- Services covered by workers’ compensation or that are the employer’s responsibility.
- Services provided or arranged by criminal justice institutions for Members confined therein, unless care would be covered as Emergency Care.
- Speech aid prosthetic devices and follow up modifications.
- Surgery to correct malocclusion or temporomandibular joint disorders.
- Treatment to restore tooth structure lost due to attrition, erosion, or abrasion.

Limitations

- Dental Services in Conjunction with Medically Necessary General Anesthesia.
- Repair or replacement due to normal wear of fixed and removable prosthetics appliances.
- Works-in-Progress started prior to effective date of coverage.

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**Questions? Call Membership Services** (M-F, 8 am-6 pm)

Portland area..503-813-2000. All other areas..1-800-813-2000. TTY..1-800-735-2900. Language Interpretation Services, all areas..1-800-324-8010

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This is not a contract. This benefit summary does not fully describe your benefit coverage with Kaiser Foundation Health Plan of the Northwest. For more details on your benefit coverage, claims review, and adjudication procedures, please see your Evidence of Coverage (EOC) or call Membership Services. In the case of conflict between this summary and the EOC, the EOC will prevail.