

Summary of Dental Benefits

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

Membership Services: 1-800-813-2000

Oregon R053 4/1/2019 - 3/31/2020

Willamette University Group Number: 2014-006

Benefit Maximum per Calendar Year (covered Services subject to either Benefit Maximum count toward both Benefit Maximums)	\$1,500
,	You pay
Dental Office Visit Charge – Applies to all visits	\$15
Deductible (Per Calendar Year; applies to all services unless otherw	vise indicated)
For one Member	\$0
For an entire Family	\$0
Preventive and Diagnostic Services (Not subject to or counted tow	vard the Deductible)
Oral exam	\$0
X-rays	\$0
Teeth cleaning	\$0
Fluoride	\$0
Minor Restoration Services	
Routine fillings	\$0
Plastic and steel crowns	\$0
Simple extractions	\$0
Oral Surgery Services	
Surgical tooth extractions	20% Coinsurance
Periodontics	
Treatment of gum disease	20% Coinsurance
Scaling and root planing	20% Coinsurance
Endodontics	
Root canal therapy	20% Coinsurance
Major Restoration Services	
Gold or porcelain crowns	20% Coinsurance
Bridges	20% Coinsurance
Removable Prosthetic Services	
Full upper and lower dentures	20% Coinsurance
Partial dentures	20% Coinsurance
Relines	20% Coinsurance
Rebases	20% Coinsurance
Nitrous oxide (Not subject to or counted toward the Deductible or B	enefit Maximum)
Adults and children age 13 years and older	\$25
Children age 12 years and younger	\$0

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Orthodontics	All Members: 50% of Charges up to the \$1,500 Lifetime Benefit Maximum, and 100% of Charges thereafter.

Plan is subject to exclusions and limitations. A complete list of the exclusions and limitations is included in the Evidence of Coverage (EOC). Sample EOCs are available upon request.

Questions? Call Member Services (M-F, 8 am-6 pm) or visit **kp.org** Portland area: 503-813-2000 All other areas: 1-800-813-2000 TTY.711. Language Interpretation Services, all areas 1-800-324-8010

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 benefit coverage, claims review, and adjudication procedures, please see your EOC or call Member Services. In the case of a conflict between this summary and the EOC, the EOC will prevail.