

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 LHCO 4/1/2018 - 3/31/2019

Lewis & Clark College Group Number: 1495-006

| Benefit Maximum per Member, per Calendar Year | \$1,500 |
|--|--|
| | You pay |
| Dental Office Visit Charge – Applies to all visits | \$15 |
| Deductible (Per Calendar Year | |
| For one Member | \$0 |
| For an entire Family | \$0 |
| Preventive and Diagnostic Services | |
| Oral exam | \$0 |
| X-rays | \$0 |
| Teeth cleaning | \$0 |
| Fluoride | \$0 |
| Basic 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 and partial dentures | 20% Coinsurance |
| Relines | 20% Coinsurance |
| Rebases | 20% Coinsurance |
| Nitrous oxide (Not counted toward the Benefit Maximum) | |
| Adults and children age 13 years and older | \$25 |
| Children age 12 years and younger | \$0 |
| Orthodontics | All Members: 50% of Charges after Deductible up to the \$1,500 Lifetime Benefit Maximum, and 100% of Charges thereafter. |

SSOB ORLGTRADdental 0117_0516



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.