

# 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 LHCC**

**1/1/2017 - 12/31/2017**

**Clackamas County**

**Group Number: 1183**

<b>Benefit Maximum</b> per Member, per Calendar Year	None
	<b>You pay</b>
<b>Dental Office Visit Charge</b> – Applies to all visits	\$5
<b>Deductible</b> (Per Calendar Year)	
<b>For one Member</b>	\$0
For an entire Family	\$0
<b>Preventive and Diagnostic Services</b>	
Oral exam	No additional charge
X-rays	No additional charge
Teeth cleaning	No additional charge
Fluoride	No additional charge
<b>Basic Restoration Services</b>	
Routine fillings	No additional charge
Plastic and steel crowns	No additional charge
Simple extractions	No additional charge
<b>Oral Surgery Services</b>	
Surgical tooth extractions	No additional charge
<b>Periodontics</b>	
Treatment of gum disease	No additional charge
Scaling and root planing	No additional charge
<b>Endodontics</b>	
Root canal therapy	No additional charge
<b>Major Restoration Services</b>	
Gold or porcelain crowns	\$45 for each
Bridges	\$45 for each
<b>Removable Prosthetic Services</b>	
Full and partial dentures	\$95 for each partial denture, \$65 for each full denture
Relines	\$25
Rebases	\$25
<b>Nitrous oxide</b> (Not counted toward the Benefit Maximum)	
Adults and children age 13 years and older	\$25
Children age 12 years and younger	\$0
<b>Orthodontics</b>	All Members: 50% of Charges up to the \$2,000 Lifetime Benefit Maximum, and 100% of Charges thereafter.

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**Implants**

50% Coinsurance up to the \$2,000 Dental Implant benefit maximum

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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.

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**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

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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 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.

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