

# 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 R079**

**1/1/2021 - 12/31/2021**

**Carewell SEIU 503**

**Group Number: 19581-001**

<b>Benefit Maximum</b> per Calendar Year	\$2,500
	<b>You pay</b>
<b>Dental Office Visit Charge</b> – Per visit	\$0
<b>Deductible</b> (Per Calendar Year; applies to all services unless otherwise indicated)	
For one Member	\$0
For an entire Family	\$0
<b>Preventive and Diagnostic Services</b> (Not subject to or counted toward the Deductible or Benefit Maximum)	
Oral exam	\$0
X-rays	\$0
Teeth cleaning	\$0
Fluoride	\$0
<b>Minor Restoration Services</b>	
Routine fillings	\$0
Plastic and steel crowns	\$0
Simple extractions	\$0
<b>Oral Surgery Services</b>	
Surgical tooth extractions	10% Coinsurance
<b>Periodontics</b>	
Treatment of gum disease	\$0
Scaling and root planing	\$0
<b>Endodontics</b>	
Root canal therapy	10% Coinsurance
<b>Major Restoration Services</b>	
Gold or porcelain crowns	30% Coinsurance
Bridges	30% Coinsurance
<b>Removable Prosthetic Services</b>	
Full upper and lower dentures	30% Coinsurance
Partial dentures	30% Coinsurance
Relines	30% Coinsurance
Rebases	30% Coinsurance
<b>Nitrous oxide</b> (Not subject to or counted toward the Deductible or Benefit Maximum)	
Adults and children age 13 years and older	\$25
Children age 12 years and younger	\$0
<b>Orthodontics</b>	Not a covered benefit

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**Implants**

30% Coinsurance up to the Benefit Maximum and  
100% of charges thereafter.

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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.