

# Dental

If you have retired under the PAT bargaining agreement and otherwise meet the eligibility requirements for the Trust Early Retiree Voluntary Dental/Vision Plans, you may choose either Basic Dental/Vision or Buy-up Dental/Vision. This coverage is generally provided as a package; however, you may elect dental only coverage if you are enrolled in the Kaiser Permanente early retiree medical plan option. (See *Participating in the Plans — Eligibility* for details on who is eligible for coverage and *Medical* for additional vision-related information.)

This section describes the Basic Dental and Buy-up Dental benefits. For information about Basic Vision and Buy-up Vision benefits, see *Vision*.

## Highlights of the Plans

Features	
<b>Who is eligible</b>	PAT early retirees and eligible dependents enrolled in the Trust Early Retiree Plan1 (Closed), Trust Early Retiree Plan2 (Open), Kaiser Permanente HMO, Providence Personal Option Plan or have medical coverage through a spouse/domestic partner's plan
<b>Enrollment</b>	You must enroll and make monthly self-payments to participate in the Trust Early Retiree Voluntary Dental/Vision Plans
<b>Basic Dental/Vision</b>	Combined dental/vision package that provides: <ul style="list-style-type: none"><li>• <b>Dental</b> — benefits for diagnostic and preventive care, basic, restorative and prosthodontic services up to a maximum annual benefit of \$1,200 per person per calendar year</li><li>• <b>Vision</b> — benefits for routine eye exams, lenses, frames and additional discounts through VSP doctors. Copayments and maximum benefit allowances apply. You may purchase eye services and materials not covered by the plan at discounted prices from VSP preferred providers</li></ul>

## Features

### Buy-up Dental/Vision

Combined dental/vision package that provides a higher level of coverage:

- **Dental** — benefits for diagnostic and preventive care, basic, restorative and prosthodontic services up to a maximum annual benefit of \$1,750 per person per calendar year. Orthodontic services paid up to \$1,250 lifetime benefit maximum per person
- **Vision** — benefits for routine eye exams, lenses, frames and additional discounts through VSP preferred providers. Many services covered in full up to the benefit maximum. You may purchase eye services and materials not covered by the plan at discounted prices from VSP preferred providers

## How the Plans Work

For both the Basic and Buy-up Dental Plans, you may go to any licensed dentist for dental care. During your initial appointment, tell your dentist that you have dental benefits through the Trust Early Retiree Voluntary Dental Plan. Give your member ID number and group number to the dentist. Your ID and group number are printed on your ID card. The group number is 10013296.

## How the Plans Pay Benefits

The Trust Early Retiree Voluntary Dental Plans pay a percentage of covered expenses, based on usual and customary or reasonable rates (UCR), up to a maximum benefit amount per calendar year. There is no maximum for children under 19. UCR rates represent the fees and prices regularly charged by your dentist and other dentists in your area for the dental services and supplies generally furnished for cases like yours. You are responsible for paying coinsurance for covered services, costs exceeding the UCR, and all expenses over the annual benefit maximum and lifetime orthodontic maximum.

If you select a more expensive plan of treatment than is UCR, the Trust Early Retiree Voluntary Dental Plans will pay the applicable percentage of the UCR fee for the less expensive treatment. You will be responsible for the remainder of the dentist's fee.

The Basic and Buy-up Dental Plans cover many of the same services. The plans differ in the amount of benefits they pay — you will pay an annual deductible and higher coinsurance for some services under the Basic Dental Plan, but you will also pay a lower monthly premium rate for this coverage. The Basic Dental Plan also does not cover orthodontia services, while the Buy-up Dental coverage does.

## ANNUAL DEDUCTIBLE

The Basic Dental Plan annual deductible is \$50 per person per calendar year. You pay the deductible each year before the plan begins to pay benefits.

There is no annual deductible under the Buy-up Dental Plan.

## MAXIMUM BENEFITS

The Basic Dental Plan pays a percentage of covered expenses based on UCR, up to \$1,200 per person per calendar year.

The Buy-up Dental Plan pays a percentage of covered expenses based on UCR, up to \$1,750 per person per calendar year. This plan also pays orthodontic benefits up to a lifetime maximum of \$1,250 per person.

The dollar amount that the Trust pays toward covered dental services for you or a covered dependent during a calendar year is applied toward this annual maximum.

If you wish to see how much has been paid toward the annual maximum as of a given date, you may call Regence. You should remember that the amount you will be given will only reflect the bills for service that Regence has received and processed as of the date your inquiry is made.

## *Predetermination of Benefits*

Predetermination of benefits is a procedure by which your dentist submits a description of your treatment plan **before** work starts. When you or a covered dependent requires dental care, you may ask your dentist to file for predetermination of benefits.

The Trust will review the recommended treatment and notify your dentist of the dollar amounts payable under the plan for the procedures in question. Remember that a predetermination is not a guarantee of payment. To receive benefits for the predetermined services, you or a covered dependent must be eligible when the services are rendered. Predetermined benefits are subject to all plan provisions, including the annual benefit maximum for the specific dental plan.

## What the Plans Cover

The Trust Early Retiree Voluntary Dental Plans cover the following services when performed by a licensed dentist and when determined to be necessary and customary by the standards of generally accepted dental practice for the prevention or treatment of oral disease or for accidental injury, including masticatory function. No benefits are payable for services or supplies for which the patient is not liable.

The following services may also be provided by a dental mechanic or denturist to the extent that he or she is operating within the scope of his or her license as required under law in the state of Oregon.

Covered Services	Basic Dental	Buy-up Dental
<p><b>Class I Services</b></p> <p><i>Preventive services</i>, including:</p> <ul style="list-style-type: none"> <li>• Cleaning (prophylaxis) two times per calendar year, two additional cleanings per year with periodontic issues</li> <li>• Fluoride application for dependents age 14 and under, two times per calendar year</li> <li>• Sealants for dependents through age 18, once every five calendar years</li> <li>• Space maintainers</li> </ul> <p><i>Diagnostic services</i>, including:</p> <ul style="list-style-type: none"> <li>• Routine examination, two times per calendar year</li> <li>• Bitewing X-rays, two times per calendar year</li> <li>• Full mouth X-rays or panoramic film, once every five calendar years</li> </ul>	Plan pays 80% of UCR after deductible	Plan pays 100% of UCR
<p><b>Class II Services</b></p> <ul style="list-style-type: none"> <li>• <i>Oral surgery</i>: Surgical extractions and certain other minor surgical procedures, including general anesthesia when administered by a dentist in connection with a covered oral surgery and when given in a dental office</li> <li>• <i>Restorative</i>: Treatment of tooth decay with amalgam, synthetic porcelain, and plastic materials (Refer to Class III Services for other restorations.)</li> <li>• <i>Endodontic</i>: Procedures for pulpal therapy and root canal filling</li> <li>• <i>Periodontic</i>: Treatment of tissues supporting the teeth, including scaling once every three years</li> </ul>	Plan pays 80% of UCR after deductible	Plan pays 80% of UCR
<p><b>Class III Services</b></p> <ul style="list-style-type: none"> <li>• <i>Restorative</i>: Treatment of tooth decay with crowns, jackets and gold or cast restorations, including onlays and implants. Covered only when teeth cannot be restored with other materials (See "Limitations" on page 32.)</li> </ul>	Plan pays 50% of UCR after deductible	Plan pays 80% of UCR
<p><b>Class IV Services</b></p> <ul style="list-style-type: none"> <li>• <i>Prosthodontic</i>: Procedures for construction or repair of fixed bridges, partials and complete dentures (See "Limitations" on page 32.)</li> </ul>	Plan pays 50% of UCR after deductible	Plan pays 50% of UCR
<p><b>Class V Services</b></p> <ul style="list-style-type: none"> <li>• <i>Orthodontic</i>: Benefits will be provided to eligible early retirees and their covered dependents</li> </ul>	Not covered	Plan pays 50% of UCR up to a lifetime maximum benefit of \$1,250 per person

## What's Not Covered

The Trust Early Retiree Voluntary Dental Plans have the following exclusions and limitations. (See “Exclusions” on page 31 and “Limitations” on page 32 for details.)

### *Exclusions*

The Trust Early Retiree Voluntary Dental Plans do not cover:

- All other services or supplies not specifically covered (See “What the Plans Cover” on page 29 for details.)
- Charges for canceled appointments
- Claims submitted more than 12 months after the date of rendition of the service
- Experimental procedures
- Hospital costs or any additional fees charged by the dentist because the patient is hospitalized
- Orthodontia services (excluded under the Basic Dental Plan only)
- Periodontal splinting, including crowns or bridgework for splinting
- Prescribed drugs, pre-medications or analgesia (nitrous oxide)
- Separate charges for anesthesia, other than general anesthesia administered by a licensed dentist in connection with covered oral surgical services performed in a dental office. Separate charges for anesthesia when used for restorative procedures are not covered
- Services covered under workers’ compensation or employer’s liability laws and services covered by any federal, state, county, municipality or other governmental agency
- Services for cosmetic reasons
- Services for plaque control, oral hygiene or dietary instructions
- Services for rebuilding or maintaining chewing surfaces due to teeth out of alignment or occlusion, or for stabilizing the teeth. Such services include, but are not limited to, increasing vertical dimension, equilibration and periodontal splinting
- Services for repair or replacement of an orthodontic appliance furnished under the plan
- Services for the application of fluoride for children over the age of 14 or adults
- Services for the application of sealants for children over the age of 18 or adults
- Services started prior to the date the individual became eligible for services under the plan

- Services with respect to congenital (hereditary) or developmental (following birth) malformations or cosmetic reasons; including, but not limited to cleft palate, upper and lower jaw malformations, enamel hypoplasia (lack of development), fluorosis and disturbance of the temporomandibular joint
- Temporary devices.

### ***Limitations***

The Trust Early Retiree Voluntary Dental Plans have a number of limitations:

- A separate charge for anesthesia is not covered when used for restorative procedures
- Benefits will be limited to one sealant, per tooth, during any five-year period
- If a tooth can be restored with a material such as amalgam, silicate or plastic, but another type of restoration is selected, covered expense will be limited to the cost of amalgam, silicate or plastic
- Oral surgery benefits are limited to minor surgical procedures and do not allow payment for services such as vestibuloplasty
- Replacement of an existing prosthetic device is covered only if it cannot be made satisfactory. Replacement is never covered if the existing device is less than seven years old. Specialized or personalized prosthetics are limited to the cost of standard devices
- Replacement of necessary crowns, jackets, and gold or cast restorations, including onlays, is covered only if seven years have elapsed since the last prior crown, jacket, and gold or cast restoration was furnished on the tooth. Inlays are not covered. Alternative benefits may apply
- Sealant benefits for the occlusal surfaces of unrestored permanent bicuspids and first and second molars are limited to children under age 19
- The obligation under the Buy-up Dental Plan to make payments for orthodontic treatment will cease upon termination of treatment for any reason prior to completion of the case
- The obligation under the Buy-up Dental Plan to make payments for orthodontic treatment begun prior to the patient's eligibility date will be calculated on the balance of a dentist's normal payment pattern remaining at the patient's initial eligibility date. The maximum orthodontic benefit amount will apply fully to this amount
- The obligation under the Buy-up Dental Plan to make monthly or other periodic payments for orthodontics will cease on termination of eligibility.

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## How to File a Dental Claim

You do not need to fill out claim forms. Your dentist will submit an electronic claim for you. However, you will need to provide the required patient identification information. If your dependents receive services through the Trust Early Retiree Voluntary Dental Plan, make sure that **your** member ID number and group number are listed on the claim.

Once the claim is processed, the plan pays benefits directly to your dentist. You are notified when the claim has been processed.

