

# 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

Oregon T042

7/1/2024 - 6/30/2025

City of Portland

Group Number: 7720-030

**Benefit Maximum** per Plan Year

Per Member per Year	None
	<b>You pay</b>
<b>Dental Office Visit Charge</b> – per visit, plus any Cost Share shown below for specific Services	\$10
<b>Deductible</b> (Per Plan Year; applies to all services unless otherwise indicated)	
For one Member per Year	\$0
For an entire Family per Year	\$0
<b>Preventive and Diagnostic Services</b> (Not subject to or counted toward the Deductible )	
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	20% Coinsurance
<b>Periodontics</b>	
Treatment of gum disease	20% Coinsurance
Scaling and root planing	20% Coinsurance
<b>Endodontics</b>	
Root canal therapy	20% Coinsurance
<b>Major Restoration Services</b>	
Gold or porcelain crowns	20% Coinsurance
Bridges	20% Coinsurance
<b>Removable Prosthetic Services</b>	
Full upper and lower dentures	20% Coinsurance
Partial dentures	20% Coinsurance
Relines	20% Coinsurance
Rebases	20% 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>Teledentistry</b>	
Telephone and video visits	\$0

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<b>Orthodontics</b>	All Members: 50% of Charges up to the \$5,000 Lifetime Benefit Maximum, and 100% of Charges thereafter.
<b>Implants</b>	50% Coinsurance up to the \$2,000 Dental Implant Benefit Maximum.

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 or you may go to [kp.org/plandocuments](http://kp.org/plandocuments).

**Questions? Call Member Services** (M-F, 8 am-6 pm) or visit [kp.org](http://kp.org) Portland area: 503-813-2000  
All other areas: 1-800-813-2000. TTY, all areas: 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.