Summary of Dental Plan Benefits
SALINA REGIONAL HEALTH CENTER
Group #52210-45044
Effective January 1, 2018

Maximum Contract Benefit Per Person:
The Maximum Benefit payment for all Basic and Major Covered Services, including Implant Services, for each Enrollee in any one Contract Year is: Two Thousand Five Hundred Dollars ($2,500.00). Diagnostic and Preventive Covered Services are not subject to the annual maximum.

Deductible Limitations
Coverage for diagnostic and preventive services is not subject to any deductible amount. For all other covered services, the Contract Year deductible is:

- $50 per employee
- $100 per family

Dependent Ages
Dependents are covered to age twenty-six (26).

 Benefit % Paid
 Delta Dental PPO Premier/Non-participating

100% 100% DIAGNOSTIC & PREVENTIVE (Not Subject to Deductible or Annual Maximum)

Diagnostic:
Includes the following procedures necessary to evaluate existing dental conditions and the dental care required:
- Oral examinations – two (2) times per Contract Year.
- Diagnostic x-rays – bitewings two (2) times per Contract Year.
- Full mouth x-rays – once each three (3) years.

100% 100% Preventive:
Provides for the following:
- Prophylaxis (Cleanings) - two (2) times per Contract Year.
- Topical Fluoride – two (2) times per Contract Year.
- Space Maintainers
- Sealants – one (1) per tooth per lifetime for dependent children under age sixteen (16) when applied to sound permanent bicuspids and molars.

80% 80% BASIC (Subject to Deductible)

Ancillary: Provides for one (1) emergency examination per plan year by the Dentist for the relief of pain.

Oral Surgery: Provides for extractions and other oral surgery including pre and post-operative care.

Regular Restorative: Provides amalgam (silver) restorations; composite (white) resin restorations on all teeth; and stainless steel crowns for dependents under age twelve (12); provides for inlays once each sixty (60) months and only if amalgam restoration is not possible.

Endodontics: Includes procedures for root canal treatments and root canal fillings.

Periodontics:
a. Includes procedures for the treatment of diseases of the tissues supporting the teeth. Periodontal maintenance, including evaluation, is counted towards the limitation for prophylaxis.
b. Surgical periodontal procedures.

MAJOR (Subject to Deductible)

Special Restorative: When teeth cannot be restored with a filling material listed in Regular Restorative Dentistry, provides for individual crowns.

Prosthodontics: Includes bridges, partial and complete dentures, including repairs and adjustments, if more than twelve (12) months after initial insertion, denture reline once (1) each twenty-four (24) months.

Implants: Includes procedures for specified implant services. A predetermination is recommended.

Occlusal Guards: Removable dental appliances, which are designed to minimize the effects of bruxism (grinding) and other occlusal factors are allowed once (1) every year.

ORTHODONTICS (Subject to Deductible)

Orthodontics: Includes orthodontic appliances and treatment, interceptive and corrective, for adults and dependent children to age twenty-six (26). Also covers employee and spouse to any age.

This is a summary of benefits only and does not bind Delta Dental of Kansas to any coverage. Please refer to the Description of Dental Care Coverage for complete coverage information, including exclusions and limitations. Coverage as described in the employer group’s Agreement to Provide Dental Benefits (contract) is binding on all parties and supersedes all other written or oral communications.
Welcome to Delta Dental of Kansas

With Delta Dental of Kansas you receive the expertise of the largest, most experienced dental benefits carrier in the nation, paired with our unparalleled customer service. Together with your employer, we have designed a dental benefit plan to help protect the oral health of you and your covered dependents. Regular preventive dental care not only reduces the cost and the pain generally associated with extensive dental work, but a healthy mouth contributes to your overall well-being.

Network Strength

You are free to go to any dentist of your choice; however, there may be a difference in the amount of payment if the dentist is not a Delta Dental participating dentist. It is to your advantage to choose a Delta Dental PPO or Delta Dental Premier dentist. Since nearly 4 out of 5 dentists nationwide contract with Delta Dental, the chances are excellent your dentist is already a member. If you have any questions about whether your dentist participates with Delta Dental, contact Customer Service at (316) 264-4511 or toll-free at (800) 234-3375. You may also locate a dentist using the ‘Locate a Dentist’ link at www.deltadentalks.com.

Website Capabilities

From our website, www.deltadentalks.com, you can:

- Locate a participating Delta Dental PPO or Delta Dental Premier dentist anywhere in the United States
  - Go to www.deltadentalks.com
  - Click on ‘Subscribers’ across the top of the page
  - Under ‘Locate a Dentist’, click on ‘Dentist Search’ then ‘Find a Dentist’
  - #1 - ‘Product Selection’, click on ‘Delta Dental PPO’ or ‘Delta Dental Premier’
  - #2 - ‘Your Location’, type in either your city and state OR your zip code
  - You may also sort the number of results, enter your dentist’s name or choose by specialty
    - Click on ‘Search for a Dentist’
- Check your eligibility and plan information
- Print an ID card
- Check claim status
- Estimate your out-of-pocket dental care costs with the Flexible Spending Account Estimator
- Sign-up to receive your Explanation of Benefits electronically
- Learn about oral health and wellness