



DENTAL BENEFITS

EFFECTIVE JANUARY 1, 2024

ANNUAL MAXIMUM BENEFIT \$1,500.00 PER COVERED MEMBER
(includes Basic/Restorative and Major/Prosthodontic services)

PREVENTATIVE AND DIAGNOSTIC

- oral exams (two per calendar year)
- cleanings (two per calendar year)
- bitewing x-rays (two sets per calendar year)
- full mouth x-rays (one set every 36 months)
- fluoride treatments (to age 19)
- space maintainers (to age 19)
- sealants (to age 14)

Health Trust pays 100% of allowed amounts

Eligible members may receive additional preventative services through the Northeast Delta Dental Health through Oral Wellness (HOW) program.

BASIC / RESTORATIVE

- extractions
- oral surgery
- fillings
- general anesthetics
- periodontal treatment
- endodontic treatment
- Antibiotics

Health Trust pays 80% of allowed amounts

Participant pays 20% after \$25 Annual Deductible*

MAJOR / PROSTHODONTICS

- initial installation of bridgework
- initial installation of partial or full removal dentures
- inlays, onlays, crowns
- repair or recementing of bridgework, dentures, crowns, onlays
- dental implants

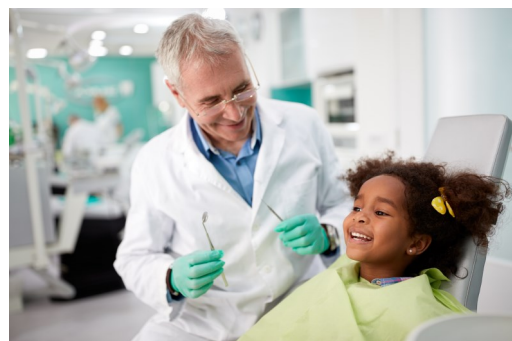
Health Trust pays 50% of allowed amounts

Participant pays 50% after \$25 Annual Deductible*

ORTHODONTIC COVERAGE

Coverage available for Adults and Children to a Maximum Lifetime Benefit of \$1,500.00

Health Trust pays 50% (No Deductible)



**Annual Deductible is \$25.00 per person to a maximum of \$75.00 per family, subject to any combination of covered basic/ restorative and major/prosthodontic services.*

PPO and Premier Dental Providers are included in -network.

Preventative, Diagnostic and Orthodontic Services do not accumulate towards the annual maximum.

For more information, please contact the Health Trust at 1-800-852-8300 or speak with your Field Service Representative.