

Summary of Dental Benefits
HDS Children's Dental Plan - Group No. 2999
Effective: 01/01/2021

This summary is a brief description of a Hawaii Dental Service (HDS) member's dental benefits. Some limitations, restrictions, and exclusions may apply. Plan benefits are governed by the provisions detailed in the group's and/or subscriber's agreement with HDS, HDS's Procedure Code Guidelines and Delta Dental National Policies when applicable. Certain provisions may vary such as waiting periods, frequency and age limitations, etc. and may not be included in this summary. For additional information, please contact HDS Customer Service. As an HDS member, you may visit any licensed dentist, but your out-of-pocket costs may be lower when visiting an HDS participating dentist. All dental claims must be filed within 12 months of the date of service to be eligible for HDS claims payment.

DEDUCTIBLE AMOUNT Does not apply to benefits covered at 100% and orthodontics.

MAXIMUM OUT OF POCKET (MOOP) \$350 per child or \$700 for 2 or more children, per calendar year. The most you will pay before your dental plan begins to pay 100% of your benefit. Out-of-pocket payments made for non-covered services, alternate benefits and non-medically necessary orthodontics will not count toward the MOOP.

CHILDREN (THROUGH AGE 25)	
Maximum Out of Pocket (MOOP)	Yes
Deductible	\$50/person per year
HDS PLAN PAYS CHILDREN (THROUGH AGE 25)	
DIAGNOSTIC	
Examinations	100% 2x/yr
Bitewing X-rays	30% 2x/yr
Other X-rays	30% Full mouth X-rays 1x/5 yrs
PREVENTIVE	
Cleanings	100% 2x/yr
Fluoride	100% 2x/yr Through age 18
Silver Diamine Fluoride	100%
Space Maintainers	100% Through age 18
Sealants One treatment per tooth per lifetime to permanent molar teeth when there are no prior fillings on biting surfaces.	100% Through age 18

TOTAL HEALTH PLUS BENEFITS

If the member has multiple conditions, the member will only be eligible for the benefit with the most cleaning(s) and/or gum maintenance treatments of a single condition. All benefits are covered at 100% unless otherwise noted.

Diabetes • Cleanings/Gum Maintenance	Additional 2x/yr
Cancer (other than Oral) • Cleanings/Gum Maintenance • Fluoride Treatments	Additional 2x/yr Additional 2x/yr
Oral Cancer • Cleanings/Gum Maintenance • Fluoride Treatments	Additional 2x/yr Additional 4x/yr
Sjogren's Syndrome • Cleanings/Gum Maintenance • Fluoride Treatments	Additional 2x/yr Additional 4x/yr
Stroke • Cleanings/Gum Maintenance	Additional 2x/yr
Heart Attack, Congestive Heart Failure • Cleanings/Gum Maintenance	Additional 2x/yr
Kidney Failure • Cleanings/Gum Maintenance	Additional 2x/yr
Organ Transplant • Cleanings/Gum Maintenance	Additional 2x/yr
Pregnancy (Expectant Mothers) • Cleanings/Gum Maintenance	Additional 1x/yr
Medical Risk for Cavities • Fluoride Treatments	Additional 3x/yr
BASIC CARE	
Fillings Once every two years per tooth per surface.	30% White-colored fillings limited to front teeth.
Root Canals	30%
Gum/Bone Surgeries & Maintenance (non-medical risk factors) Once every three years per quad.	30%
Oral Surgeries	30%
MAJOR CARE	
Crowns	30% 1x/7yrs per tooth White crowns limited to front teeth and bicuspid.
Fixed Bridges & Dentures	30% 1x/7yrs per tooth
OTHER SERVICES	
Adjunctive General Services	30%
Emergency Treatment of Dental Pain (Palliative Treatment) Once per visit per dental office for relief of pain but not to cure	30% Nitrous Oxide, IV sedation and hospital care is covered.
Athletic Mouth Guards	30% 1x/24-months Through age 18

ORTHODONTICS**Medically Necessary Ortho**

Limited to dependent children for those cases involving repair of the cleft lip and/or cleft palate, severe facial birth defects, or an incurred injury that affects the function of speech, swallowing, and/or chewing.

50%

Through age 18

Special Consideration: Assessment of salivary flow is covered.

05/29/2020

We're
giving
you more
to smile
about.



Total Health Plus

supplemental benefits designed for members in need of extra care

We just upgraded
your dental plan to
help you live well
and **smile** more.

We understand some people need more oral health services to maintain total body health. That's why we've upgraded your dental plan to include Total Health Plus, a supplemental set of benefits tailored to certain medical conditions or diagnoses.

What can Total Health Plus do for me and my family?

HDS Total Health Plus Benefits provides additional coverage for members with:



Designed for Prevention

HDS Total Health Plus gives you access to more services and shares the importance of maintaining good oral health care. This supplemental set of benefits is essential to improving your overall health and is designed to prevent oral disease and tooth decay that accompanies certain medical conditions or diseases. Contact your dentist to see if you qualify for Total Health Plus benefits.

Contact Us

Phone
(808) 529-9248 or call toll-free at 1-844-379-4325

Email
CS@HawaiiDentalService.com

To create and view your account online, visit:
HawaiiDentalService.com

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HDS Total Health Plus Benefits

Medical Condition or Diagnosis	Benefit	Frequency
Diabetes <i>(or history of diabetes)</i>	Cleanings	two additional per year
Cancer <i>(or history of cancer or undergoing treatment such as chemotherapy or radiation; not including oral cancer)</i>	Cleanings Fluoride Treatments	two additional per year two additional per year
Oral Cancer <i>(or history of oral cancer or undergoing treatment for oral cancer)</i>	Cleanings Fluoride Treatments	two additional per year four additional per year
Sjögren's Syndrome <i>(or history of Sjögren's Syndrome)</i>	Cleanings Fluoride Treatments	two additional per year four additional per year
Stroke <i>(or history of stroke; TIA - Transient Ischemic Attack)</i>	Cleanings	two additional per year
Heart Attack, Congestive Heart Failure <i>(or history of heart attack; MI - Myocardial Infarction)</i>	Cleanings	two additional per year
Kidney Failure <i>(or history of renal failure or dialysis)</i>	Cleanings	two additional per year
Organ Transplants <i>(or history of organ transplants)</i>	Cleanings	two additional per year
Pregnancy <i>(expectant mothers)</i>	Cleanings	one additional per year
Medical Risk for Cavities	Fluoride Treatments	three additional per year

All benefits listed above are covered at 100%.

Access to HDS Information 24/7

Visit HDS Online at HawaiiDentalService.com to:

ACCESS YOUR ACCOUNT

- Visit HawaiiDentalService.com
- Click “Member Login”
- Click “Create an account”
- Complete the “Account Registration” form
- Select “Yes” to be notified via e-mail when a claim is processed and “Yes” to “Request electronic Explanation of Benefits”
- Click “Register”

CHECK

- Whether you and/or your dependents are eligible for HDS benefits
- What dental services are covered by your plan
- What the limits are of each type of covered service and how much you have used

SEARCH

- For an HDS participating dentist in Hawaii, Guam or Saipan by specialty, location, handicap accessibility, weekend hours, and more
- For a Delta Dental Premier participating dentist on the Mainland or Puerto Rico by specialty, location, weekend hours and more

VIEW

- Your Explanation of Benefits (EOB) statements
- A list of frequently asked questions
- HDS contact information

DOWNLOAD & PRINT

- A summary of your benefits for tax purposes
- Blank claim forms
- Your HDS membership card
- Your EOB statements
- HDS Notice of Privacy Practices

REQUEST

- To receive emails when your claims are processed
- To receive EOB statements via email
- An HDS membership card to be mailed to you

How to Contact HDS

Customer Service Representatives

From Oahu: 529-9248

Toll-free: 1-844-379-4325

Customer Service Call Center Hours:

Monday – Friday: 7:30 AM – 4:30 PM HST
Excluding State observed holidays and the day after Thanksgiving

Walk-in Office Hours:

Monday – Friday: 8:00 AM – 4:30 PM HST

Send Written Correspondence to:

Hawaii Dental Service
Attn: Customer Service
900 Fort Street Mall, Suite 1900
Honolulu, HI 96813-3705

E-mail: CS@HawaiiDentalService.com

FAX:

From Oahu: 529-9366
Toll-free fax: 1-866-590-7988