



Many oral health problems are preventable. HMSA makes important preventive dental care easy with the HMSA Dental Plus Plan, which is affordable and includes comprehensive benefits. If you have an HMSA medical plan and are looking for quality dental care, HMSA has you covered:

- ✓ Available for ages 65 and older.
- ✓ If your application is received by the 15th of the month your plan will begin the first of the following month.
- ✓ Individual and two-person rates available.
- ✓ \$25 deductible (applies to basic and major services only).
- ✓ No waiting period for preventive services, such as cleanings and exams.
- ✓ Wide selection of participating providers — nearly 90 percent of Hawaii's dentists participate in our programs.
- ✓ National network available when traveling outside of Hawaii.

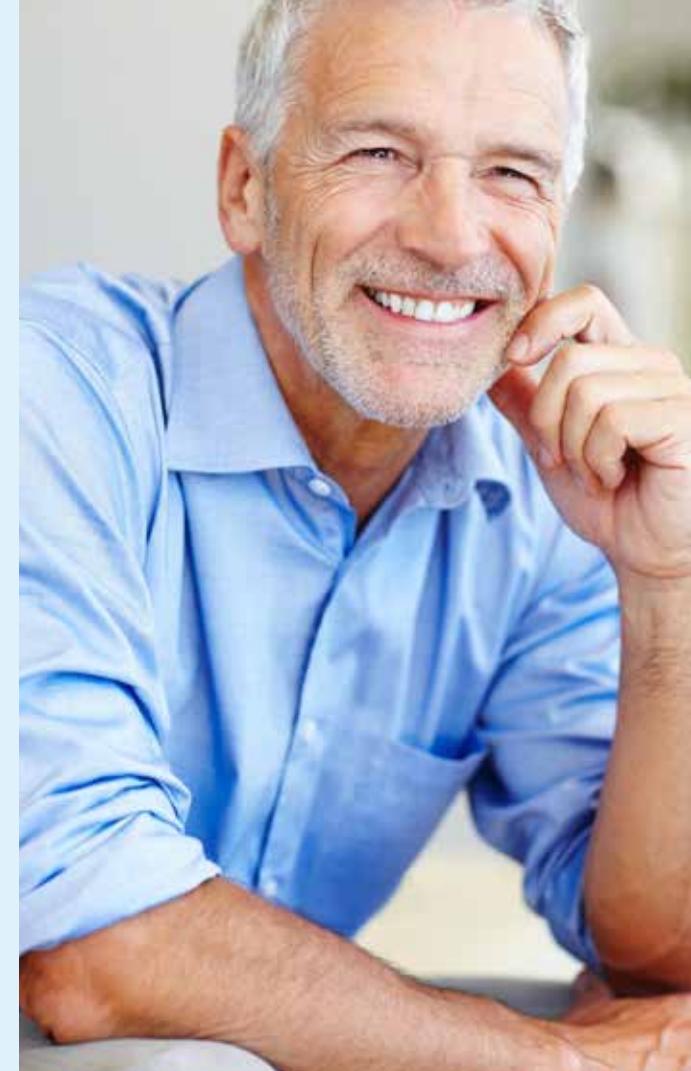
Additionally, the HMSA Dental Plus Plan also includes Calendar Year Rollover, MyDentalCoverage, and our Oral Health for Total Health approach at no extra charge.

Did you know that poor dental health can lead to diabetes, coronary artery disease, and premature babies? It's important for you to receive regular preventive dental care in order to maintain good oral and overall health.

## HMSA Dental

The Right Choice

**If you have questions or need more information about our dental plans, please call 948-5555 on Oahu or 1 (800) 620-4672 toll-free on the Neighbor Islands Monday through Friday, 8 a.m. to 5 p.m., or visit [hmsa.com/dental](http://hmsa.com/dental).**



# DENTAL PLUS PLAN FOR 2015



An Independent Licensee of the Blue Cross and Blue Shield Association

This overview is intended to provide a brief summary of plan benefits effective 1/1/2015. Certain limitations, restrictions, and exclusions may apply. Please refer to the Dental Guide to Benefits at [hmsa.com/dental](http://hmsa.com/dental) for complete information on benefits and provisions. In the case of a discrepancy between this summary and the language contained within the Dental Guide to Benefits, the latter will take precedence.

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## Calendar Year Rollover

HMSA's Calendar Year Rollover rewards you just for visiting the dentist. When the claims we pay each calendar year are less than your yearly threshold amount, \$350 of the unused maximum will be rolled over, increasing your total benefit dollars for the following year. These rollover dollars can help cover unexpected visits or higher out-of-pocket costs for complex procedures.

There are no fees for the Calendar Year Rollover benefit and nothing to fill out or send in. The benefit applies automatically as long as:

- ✓ You're an HMSA Dental PPO plan member on the last day of the calendar year.
- ✓ You received at least one covered service during the calendar year.

<b>If your dental plan's annual maximum benefit amount is:</b>	\$1,000
<b>And if your total claims don't exceed this amount for the benefit period:*</b>	\$500
<b>Then we will roll over this amount for you to use next year and beyond:*</b>	\$350
<b>However, rollover totals will be capped at this amount:*</b>	\$1,000

\* This is not an FSA. The amount reflects your benefit maximum for a given year.

## MyDentalCoverage

Log on to My Account on [hmsa.com/dental](https://hmsa.com/dental) to manage your HMSA Dental Plus Plan benefits and claims. Simply click on View Dental Benefits from your [My Account](#) home page to view and print Explanation of Benefits statements, review your covered services and claims, check your annual maximum and benefit amounts used to-date, and more. Our interactive, secure website offers all the tools and resources you need to manage your dental benefits.



## Oral Health for Total Health

HMSA is committed to our community and the health of its members. That's why we support a multi-faceted approach to optimum oral care called Oral Health for Total Health. Because we offer medical and dental coverage, we're able to analyze claims information and identify members who can benefit from focused attention and additional dental education.

The condition-specific benefits of our Oral Health for Total Health program include:

- Delivering an oral health education campaign to members, providers, and employers.
- Identifying members with diabetes, heart disease, or oral cancer, and those who are pregnant, for more specific education.
- Working with members who are not actively maintaining their oral health through focused communication that encourages members to see their dentist.
- Removing financial barriers through Enhanced Dental Benefits, a program that provides at-risk members with conditionspecific benefits beyond their standard dental benefits. Enhanced Dental Benefits have no copayment, no deductible and are covered outside the annual maximum.

Dental Plus Plan Benefit Summary	
Preventive	*Amount You Pay
<i>No Waiting Period</i>	
Exams	No Charge
X-rays: Bitewings	No Charge
X-rays: Full mouth/panoramic film	No Charge
Cleanings	No Charge
Routine/Basic	
<i>6-Month Waiting Period</i>	
Silver Fillings	20%
White Fillings	20%
Simple Extraction	20%
Major	
<i>12-Month Waiting Period</i>	
Oral Surgeries	50%
Periodontal Treatment	50%
Root Canals	50%
Crowns	50%
Bridges	50%
Dentures: Complete or partial	50%
Calendar Year	
Calendar Year Deductible	\$25
Calendar: Year maximum	\$1,000
Calendar: Year rollover	Included
Monthly Dues	
Single	\$44.77
Two Party	\$89.55

\* All plan benefits shown are based on Eligible Charges. Services received from a non-participating provider will likely result in higher out-of-pocket expenses.

\*\* Deductible applies to basic and major services only.



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**HMSA Dental**

**The Right Choice**