## AFL HOTEL & RETAURANT WORKERS HEALTH AND WELFARE TRUST SUMMARY OF DENTAL PLANS (KBU) CURRENT BENEFITS AS OF NOVEMBER 2017

	"PLAN PAYS"	"YOU PAY"
	AFL SELF-FUNDED DENTAL PLAN ADMINISTERED BY HAWAII DENTAL SERVICE (HDS)	DENTAL CARE CENTERS OF HAWAII (DCCH)
AVAILABLE DENTISTS & LOCATIONS	Choose any dentist. Over 95% of the licensed dentists in Hawaii are HDS Member Dentists. Member Dentists have agreed to limit their fees for covered services which can lower your out-of-pocket costs.	2 clinics on Oahu (see clinic locations below)
DIAGNOSTIC SERVICES	HDS pays 100% of the Allowed Amount for an exam once per calendar year; 100% of the Allowed Amount for bitewing x-rays twice per calendar year and 75% of the Allowed Amount for other x-rays. (Full mouth limited to once every 3 years.)	No charge for exam, diagnosis, dental treatment plan, or x-rays. \$12.00 charge per office visit.
PREVENTIVE SERVICES	HDS pays 100% of the Allowed Amount for cleanings twice per calendar year; 75% of the Allowed Amount for fluoride treatment for children through age 17 once per calendar year and 75% of the Allowed Amount for space maintainers (dependent children through age 17).	No charge for cleaning every six (6) months, fluoride treatment for children, teeth polishing, and teeth scaling.  \$12.00 charge per office visit.
ORAL SURGERY	HDS pays 75% of the Allowed Amount for extractions and postoperative treatment.	No charge for local anesthesia and teeth extractions.
RESTORATIVE DENTISTRY	HDS pays 75% of the Allowed Amount for amalgam and composite fillings (composite fillings limited to anterior teeth). Crowns and gold restorations once every five (5) years (when teeth cannot be restored with amalgam or composite fillings).	\$12.00 charge per office visit.  No charge for acrylic fillings. Set laboratory charges for crowns (After 12 months of enrollment,no charge)
		\$12.00 charge per office visit.
ENDODONTICS	HDS pays 75% of the Allowed Amount for root canal and pulpal therapy.	No charge for root canal and pulpal therapy. \$12.00 charge per office visit.
PERIODONTICS	HDS pays 75% of the Allowed Amount for periodontal scaling and root planing. Gingivectomy, osseous surgery and flap curettage (certain limitations apply).	No charge for emergency treatment for diseases of the gum and bones supporting the teeth, scaling and root planing, gingivectomy. \$12.00 charge per office visit.
PROSTHODONTICS	HDS pays 75% of the Allowed Amount for: Fixed bridges Dentures (complete and partial) (Certain limitations apply.)	Set lab charges for: Dentures (complete and partial) Relines Denture adjustments Space maintainers Dental Lab charges apply if you have not met eligibility (no charge after 12 months of enrollment). \$12.00 charge per office visit.
ORTHODONTICS	N/A	Plan covers 24 months of usual and customary treatment at predetermined rates.
EMERGENCY TREATMENT	HDS pays 75% of the Allowed Amount for palliative treatment (for relief of pain, but not to cure).	No charge for emergency treamtment at clinic. Up to \$50.00 per calendar year paid for emergency care off Oahu.
MAXIMUM		\$12.00 charge per office visit
BENEFITS	No maximum.	No maximum.
COORDINATION OF BENEFITS	Benefits will be coordinated with other carriers or other HDS plans.	Benefits will be coordinated with other plans. In some cases, this will pay 100% of all charges.
MAJOR EXCLUSIONS	Cosmetic surgery or dentistry; workers compensation cases; services provided by government agency; orthodontic services; services not covered in the contract; and services rendered before date of eligibility.	
DEPENDENT COVERAGE	Eligible dependent children covered to age 26.	
	n is intended only to summarize the dental plans.	

The DCCH Plan is a "dental hmo" plan. You must receive services at one of the following DCCH clinics:

## **DCCH Offices**

**GMS Dental (Honolulu)** 1136 Union Plaza, #502 Honolulu, Hawaii 96813

Phone: 536-3405

**Healthy Smiles Family Dental** 

579 Farrington Highway, #201 Kapolei, Hawaii 96707

Phone: 674-1400