



Hawaii Teamsters Local 996 Union Members

New Dental HMO Plan now available to Local 996 members in the Hawaii Teamsters Health & Welfare Trust

Go the extra smile for good health

We make preventive dental care easy and affordable with our dental HMO plan. HMSA's Dental HMO plan covers:

Preventive services: oral exams, dental cleanings, and X-rays.

Basic restorations: fillings, periodontal treatment, and root canals.

Major restorations: crowns, bridges, and dentures.

The HMSA Dental HMO plan provides you with no-cost preventive care, fixed copayments, predictable out-of-pocket costs, no calendar year maximum, no deductible, and many dentists to choose from in our network.

The standard waiting period for major services is waived if you enroll in HMSA's Dental HMO plan for September 1, 2022.



Easy access to quality care

HMSA's large and growing dental HMO network gives you more options for visiting a dentist close to home or work. You can choose a dentist in our independent HMO network or a Hawaii Family Dental provider.

To find a provider, visit hmsadental.com/find-a-dentist and select HMO from the Plan Name list.



Oral Health for Total HealthSM

If you have a qualifying medical condition, the Oral Health for Total Health program gives you additional benefits at no cost that can help improve your overall health.* These services are covered 100% when you see a participating provider. Learn more at hmsadental.com/total-health.



An Independent Licensee of the Blue Cross and Blue Shield Association

Questions?

Our Customer Service team can help! Just call (808) 948-6440 or 1 (800) 792-4672, Monday through Friday, 8 a.m. to 5 p.m. Or visit hmsadental.com.

HMSA Dental HMO Plan

Deductible	None
Calendar year maximum	None
Waiting period for new members	12-month waiting period for major services (waived for members joining on September 1, 2022)
Preventive services	Amount you pay
Exams (two per calendar year)	\$0
X-Rays	
Cleanings (two per calendar year)	
Topical Fluoride (age 0-18, two per calendar year)	
Basic services	Amount you pay
Fillings	\$10 per tooth for amalgam; \$15 per tooth for composite restorations (only covered for anterior teeth and single, stand alone, facial surface of bicuspids only)
Sealants	\$0
Periodontal treatment	\$20 for gingivectomy or gingivoplasty for 1 to 3 contiguous teeth; \$100 for four or more contiguous teeth
Root canals	\$20 per tooth for pulpotomy; \$50 per tooth for root canal therapy
Space maintainers	\$25
Major services	Amount you pay
Crowns, bridges	\$200 high noble metal
Denture	\$300 complete denture; \$250 partial denture
Implants	Not a benefit
Orthodontics	Not a benefit



To find a provider, visit hmsadental.com/find-a-dentist and select HMO from the Plan Name list.

*Qualifying conditions include diabetes, coronary heart disease, stroke, oral cancer, head and neck cancers, Sjogren's syndrome, and pregnancy.

This document provides a basic overview and comparison of a few plan benefits. Benefits and costs are based on the terms and conditions of your plan, specific exclusions and limitations, coordination of benefits, privacy, third-party liability, eligibility requirements, and appeal rights, none of which are described here. For a complete description, see your *Guide to Benefits* and any riders, certificates, or amendments. To dispute a decision made by HMSA related to benefits, reimbursement, or any other decision or action by HMSA, please follow the instructions at hmsa.com/appeals.