

Dental Insurance

For Hospitality Industry Health Insurance Trust

How the Plan Works

Group Dental Coverage helps ensure you and your family get the preventive care you need for your chompers. Plus, you'll save money in the long run.

Eligibility Requirement

If you are a full-time active employee working a minimum of 30 hours per week, you will be covered with these benefits.

Who pays for the coverage?

Dental Insurance premiums for employees are paid for by your employer. If you are covering family members, those premiums will be by you, the employee through payroll deduction.

Dependent Eligibility Requirement

Dependents must be a Legal spouse, State Registered Domestic Partner or child(ren) of the covered employee to be eligible for coverage. Children are covered up to age 26 for Preventive, Basic & Major Services, to age 19 for Orthodontia services.

LifeMap Network

We utilize one of the largest dental networks in the region, so your choice of dentists is vast.

any discrepancy between this summary and the master policy, master policy provisions will prevail.

LifeMapCo.com 1 (800) 794-5390

Benefits Summary **Plan Benefits** Deductible \$50 per member (per calendar year) \$150 per family Calendar Year \$2,000 per member Maximum Benefit Coinsurance (Percentage of the allowed amount the plan pays) *Out of Network services will be processed using the 90th percentile Out of In-Network Network* 100%* Class A (Preventive) (deductible waived) Class B (Basic) 90%* Class C (Major) 50%* Class D (Ortho) 50%* **Benefit Waiting Periods** Initial Late Enrollment* **Enrollment** Class A Services 0 Months 3 Months Class B Services 0 Months 6 Months Class C Services 6 Months 12 Months **Plan Features** Oral Exams **Dental Cleanings** Fluoride Treatment **Space Maintainers** Intraoral Bitewing. Class A (Preventive) Periapical and Occlusal X-Services rays Complete and Panoramic X-Rays Sealants and Preventive Resin Fillings

Emergency Treatment General Anesthesia **Oral Surgery** Periodontic Treatment, Class B (Basic) including Scaling and Root Services Planing and Periodontal Surgery Endodontic Treatment, including Root Canals and Pulp Capping Crowns, Inlays, and Onlays Crown Build-ups/ Core and Post Class C (Major) **Fixed Bridges** Services **Implants Dentures** Tissue Conditioning

This summary is provided for your convenience only and is not intended to be inclusive of all policy provisions. Please see your certificate for complete details. If there is



Limitations & Exclusions

- Aesthetic Dental Procedures
- Antimicrobial Agents
- · Benefits Not Stated
- Collection of Cultures and Specimens
- Connector Bar or Stress Breaker
- Cosmetic/Reconstructive Services and Supplies
- Desensitizing
- Diagnostic Casts or Study Models
- Duplicate X-Rays
- Experimental/Investigational
- Facility Charges
- Fees, Taxes, Interest, etc.
- Fractures of the Mandible
- Gold Foil Restorations
- Home Visits
- Medication and Supply Charges
- Military Service-Related Conditions
- Motor Vehicle Coverage and Other Insurance Liability
- Nitrous Oxide
- Non-Direct Patient Care
- Occlusal Treatment
- Oral Hygiene Instructions
- Orthodontic Dental Services
- Personal Comfort Items
- Photographic Images
- Pin Retention in Addition to Restoration
- Precision Attachments
- Prosthesis Services
- Provisional Splinting
- Riot, Rebellion, War and Illegal Acts
- Self-Help, Non Dental Self-Care, Training, or Instructional Programs
- Separate Charges
- Services and Supplies Provided by a Member of your Immediate Family
- Services Performed in a Laboratory
- Services connected to teeth that were missing prior to this Policy's effective date.
- Surgical Procedures
- Third Party Liability
- Tooth Transplantation Services
- Travel and Transportation Expenses
- Treatment, Procedures, Techniques or Therapies Outside Generally Accepted Dental Care Practices.
- Treatment started prior to the Member's Effective Date
- Work-Related Conditions

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