

UHA - HDS \$1,000
HDS Group Number 2345
Summary of Dental Benefits
Effective January 1, 2019

ADULTS – AGE 19 & OLDER	CHILDREN – AGE 18 & UNDER	
<ul style="list-style-type: none"> • PLAN MAXIMUM \$1,000 per person per calendar year. The most HDS will pay for each person for all covered dental services performed during the calendar year. 	<ul style="list-style-type: none"> • 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 and alternate benefits will not count toward the MOOP. 	
DIAGNOSTIC & PREVENTIVE CARE (Time limitations based on calendar year)	HDS PLAN PAYS	
	CHILD	ADULT (& CHILD ages 19-25)
<ul style="list-style-type: none"> • Examinations – 2 per year • Bitewing X-rays – 2 per year through age 18; 1 per year thereafter • Other X-rays – full mouth X-rays limited to 1 every 5 years • Cleanings – 2 per year <ul style="list-style-type: none"> Expectant mothers – 3 per year; combination of cleanings or gum treatments Diabetic patients – 4 per year; combination of cleanings or gum treatments • Fluoride – 2 per year through age 18 • Fluoride (high risk for cavities) – 1 per year • Space Maintainers – through age 18 • Sealants – through age 18 	<p>100%</p> <p>70%</p> <p>70%</p> <p>100%</p> <p>100%</p> <p>70%</p> <p>100%</p> <p>100%</p> <p>70%</p> <p>100%</p> <p>100%</p> <p>100%</p> <p>100%</p> <p>100%</p>	<p>100%</p> <p>100%</p> <p>70%</p> <p>100%</p> <p>100%</p> <p>70%</p> <p>N/A</p> <p>100%</p> <p>N/A</p> <p>N/A</p>
BASIC CARE		
<ul style="list-style-type: none"> • Fillings – silver fillings; white-colored fillings limited to front teeth • Root Canals • Gum/Bone Surgeries & Maintenance • Oral Surgeries 	<p>70%</p>	<p>70%</p>
MAJOR CARE		
<ul style="list-style-type: none"> • Crowns & Gold Restorations – 1 every 7 years • Fixed Bridges & Dentures – 1 every 7 years • Implants 	<p>50%</p> <p>50%</p> <p>N/A</p>	<p>50%</p>
OTHER SERVICES		
<ul style="list-style-type: none"> • Emergency Treatment of Dental Pain 	<p>70%</p>	<p>70%</p>
ORTHODONTICS		
<ul style="list-style-type: none"> • Medically Necessary – Limited to those cases involving repair of cleft lip and/or cleft palate, severe facial birth defects, or an incurred injury that affects the function of speech, swallowing, and/or chewing. 	<p>50%</p>	<p>N/A</p>

Note: This summary includes a brief description of your HDS dental benefits. All benefits are governed by the provisions of University Health Alliance’s agreement with Hawaii Dental Service and HDS’s Procedure Code Guidelines. All dental claims must be filed within 12 months of the date of service to be eligible for HDS claims payment. 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. Please consult your dentist or contact HDS Customer Service if you have any questions prior to enrolling.

For more information on your benefits, log on to your online account at www.HawaiiDentalService.com.

Access to HDS Information 24/7

Visit HDS Online at HawaiiDentalService.com to:

Access your online account today!

- Visit the HDS website at HawaiiDentalService.com
- Follow the directions on-screen to create a new account
- Complete the “Member Registration” form
- Select “yes” to “Request electronic Explanation of Benefits”
- A confirmation email will be sent to you with a link. Click the link to activate your account.

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

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

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

VIEW

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

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
700 Bishop Street, Suite 700
Honolulu, HI 96813-4196

E-mail: CS@HawaiiDentalService.com

FAX:

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