

# Summary of Dental Benefits

All plans offered and underwritten by Kaiser Foundation Health Plan of the Northwest, 500 NE Multnomah St., Suite 100, Portland, OR 97232

**Oregon - Custom Traditional Dental Plan**

**1/1/2025 - 12/31/2025**

**Public Employees Benefit Board**

**Group Number: 18273-064**

**Benefit Maximum per Calendar Year**

Per Member per Year	\$1,250
	<b>You pay</b>
<b>Dental Office Visit Charge</b> – per visit, plus any Cost Share shown below for specific Services	\$5
<b>Deductible</b> (Per Calendar Year; applies to all services unless otherwise indicated)	
For one Member per Year	\$0
For an entire Family per Year	\$0
<b>Preventive and Diagnostic Services</b>	
Oral exam	\$0
X-rays	\$0
Teeth cleaning	\$0
Fluoride	\$0
<b>Minor Restoration Services</b>	
Routine fillings	50% Coinsurance
Plastic and steel crowns	50% Coinsurance
Simple extractions	50% Coinsurance
<b>Oral Surgery Services</b>	
Surgical tooth extractions	50% Coinsurance
<b>Periodontics</b>	
Treatment of gum disease	\$0
Scaling and root planing	50% Coinsurance
<b>Endodontics</b>	
Root canal therapy	50% Coinsurance
<b>Major Restoration Services</b>	
Gold or porcelain crowns	50% Coinsurance
Bridges	50% Coinsurance
<b>Removable Prosthetic Services</b>	
Full upper and lower dentures	50% Coinsurance
Partial dentures	50% Coinsurance
Relines	50% Coinsurance
Rebases	50% Coinsurance
<b>Nitrous oxide</b> (Not subject to or counted toward the Deductible or Benefit Maximum)	
Adults and children age 13 years and older	\$25
Children age 12 years and younger	\$0
<b>Teledentistry</b>	
Telephone and video visits	\$0
<b>Orthodontics</b>	Not covered

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Plan is subject to exclusions and limitations. A complete list of the exclusions and limitations is included in the Evidence of Coverage (EOC). Sample EOCs are available upon request or you may go to [kp.org/plandocuments](http://kp.org/plandocuments).

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**Questions? Call Member Services** (M-F, 8 am-6 pm) or visit [kp.org](http://kp.org) Portland area: 503-813-2000

All other areas: 1-800-813-2000. TTY, all areas: 711. Language Interpretation Services, all areas: 1-800-324-8010

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This is not a contract. This benefit summary does not fully describe your benefit coverage with Kaiser Foundation Health Plan of the Northwest. For more details on benefit coverage, claims review, and adjudication procedures, please see your EOC or call Member Services. In the case of a conflict between this summary and the EOC, the EOC will prevail.

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