

2021 Pediatric dental coverage

Although coverage for adults 19 and older is optional, the federal government requires dental coverage for any person from birth to age 19. This coverage is referred to as pediatric dental coverage. When you select a 2021 Kaiser Permanente medical plan, it will be paired with the pediatric dental plan that is offered by Delta Dental of Washington unless you select one of the 2 Delta Dental family plans that include this coverage. Here is a summary of Delta Dental's pediatric dental plan benefits.

	Delta Dental participating dentist	Nonparticipating dentist
Annual maximum	Unlimited	
Annual deductible Waived on Class I benefits	\$50 / member	
Annual out-of-pocket maximum	\$350 / member; \$700 / family	Not applicable
Diagnostic and preventive Exams, prophylaxis, fluoride, X-rays, sealants	100%	100%
Restorative Restorations, includes posterior composites, endodontics, periodontics, oral surgery	80%	80%
Major Crowns, dentures, partials, bridges	50%	50%
Orthodontia (medically necessary)* Coinsurance Lifetime maximum	50% Unlimited	

*Requires preauthorization

Only fees paid to a Delta Dental PPOSM or a Delta Dental Premier[®] Dentist accrue to the annual Out-of-Pocket Maximum. \$700 per family maximum out-of-pocket limit only applies to members 18 and younger.

Monthly rate

The cost to employers for this dental coverage for members 18 and younger is billed only for the first 3 members in any one family. Dental premiums for employees or dependent enrollees 18 and younger will be assessed and billed separately from medical premiums.

1 member	\$32.13
2 members	\$64.26
3+ members	\$96.40

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Finding a participating dentist

Under your plan, you can choose a dentist from the Delta Dental PPO Plus Premier network. You can find a participating in-network dentist in your area by visiting DeltaDentalWA.com and using our “Find a Dentist” tool.

The advantages of seeing a Delta Dental PPO or Delta Dental Premier dentist

We encourage you to see a Delta Dental of Washington network dentist because that dentist can provide treatments at discounted rates and file all claim paperwork for you. We will pay our portion, and you're only responsible for your stated deductibles, coinsurance, or amounts in excess of the plan maximums. In most cases, you will experience the greatest out-of-pocket savings if you choose a dentist from the Delta Dental PPO network.

About using in-network and out-of-network dentists

When visiting an in-network dentist, be sure to mention that you're covered by Delta Dental of Washington and present your Kaiser Permanente ID card.

You are not limited to using a Delta Dental network dentist. You may use any licensed dentist. If you choose a nonparticipating dentist, you will be responsible for having the dentist complete your claim forms and ensuring that the claims are submitted to Delta Dental. Claim payments will be based on actual charges or our maximum allowable fees for nonparticipating dentists, whichever is less. You're then responsible for any balance remaining after Delta Dental pays. Unlike participating dentists, Delta Dental has no control over nonparticipating dentists' charges or billing procedures.

Questions?

Call Delta Dental of Washington at 1-800-554-1907, Monday to Friday, 7 a.m. to 5 p.m. or go online to deltadentalwa.com for answers.

This is a brief summary of benefits and does not constitute a contract. For complete plan information, please refer to your Delta Dental of Washington benefits booklet.

Kaiser Permanente refers to Kaiser Foundation Health Plan of Washington or Kaiser Foundation Health Plan of Washington Options, Inc.