

HEALTH NET ADVANTAGE DENTAL HMO



Health Net Advantage Dental HMO plans were developed in response to our clients' desire for more covered dental services and procedures that are simple for employees to understand.

With this plan, members select a Primary Care Dentist as their dental professional for performing or authorizing all their dental care. Each enrolled person in the subscriber's family may choose a different Health Net Dental HMO dentist. Specialty care dentists (periodontists, endodontists, oral surgeons and pedodontists) are available through a referral process. Orthodontia care does not require a referral. Specialty orthodontists are listed in the General Provider Directory.

Health Net Advantage Dental HMO plans are available with many plan variations, making it easier for you to match a plan and premium to meet any dental budget. Plans include:

- Most dental procedures covered at listed copayments
- No office visit copayments
- Less restrictive benefit limitations
- General anesthesia and adult fluoride as a covered benefit
- Additional cleanings covered – not limited to one cleaning every six months (subject to additional copayment)
- No deductibles or dollar maximums – benefits begin immediately
- Material upgrades are included as a covered benefit
- Cosmetic and elective dentistry covered (subject to different copays)
- No five-year frequency limitations on replacement of crowns, bridges or dentures
- One of the largest provider networks in the state
- Orthodontics for adults and children
- Teeth whitening as a covered benefit

For further information, call your Health Net sales representative at 1-800-448-4411, option 1, or visit us at www.healthnet.com.

Health Net Dental HMO plans are provided by SafeGuard Health Plans, Inc. ("SafeGuard"). Obligations of SafeGuard are not the obligations of nor guaranteed by Health Net, Inc. or its affiliates.

Diagnostic and preventive

- D0120 Periodic oral evaluation
- D0210 Intraoral – complete series (including bitewings)
- D1110/D1120 Prophylaxis, adult/child
- D1203 Topical application of fluoride (prophylaxis not included)
- D1351 Sealant, per tooth

Restorative

- D2140 Amalgam – one surface, primary
- D2140 Amalgam – one surface, permanent
- D2330 Resin-based composite – one surface, anterior

Crowns and pontics

- D2750 Crown – porcelain fused to high noble metal
- D2790 Crown – full cast, noble metal
- D6210 Pontic – cast high noble metal

Endodontics

- D3310 Anterior (excluding final restoration)
- D3320 Bicuspid (excluding final restoration)
- D3330 Molar (excluding final restoration)

Periodontics

- D4210 Gingivectomy or gingivoplasty, per quadrant
- D4260 Osseous surgery, (including flap entry and enclosure) per quadrant
- D4341 Periodontal scaling and root planing, per quadrant

Prosthetics (dentures/partials)

- D5110/D5120 Complete denture, maxillary or mandibular
- D5730 Reline complete maxillary denture

Oral surgery

- D7210 Surgical removal of erupted tooth
- D7240 Removal of impacted tooth, complete bony impaction

Orthodontics

- D8070 Comprehensive orthodontic treatment adolescent dentition (full banded case) – child through age 19
- D8090 Comprehensive orthodontic treatment (full banded case) – adult age 20 and over

Other services

- D9972 External bleaching – per arch

CDT-4	ADVANTAGE 85 ¹	ADVANTAGE 115 ²	ADVANTAGE 150	ADVANTAGE 175 ²	ADVANTAGE 225	ADVANTAGE 275 ²
• D0120	\$0	\$0	\$0	\$0	\$0	\$0
• D0210	\$0	\$0	\$0	\$0	\$0	\$0
• D1110/D1120	\$0	\$0	\$0	\$0	\$0	\$0
• D1203	\$0	\$0	\$0	\$0	\$0	\$0
• D1351	\$5	\$5	\$8	\$10	\$12	\$15
• D2140	\$0	\$0	\$0	\$8	\$10	\$12
• D2140	\$0	\$0	\$0	\$14	\$18	\$20
• D2330	\$0	\$0	\$15	\$17	\$20	\$25
• D2750	\$85	\$115	\$150	\$175	\$225	\$275
• D2790	\$85	\$115	\$150	\$175	\$225	\$275
• D6210	\$85	\$115	\$150	\$175	\$225	\$275
• D3310	\$70	\$70	\$75	\$80	\$85	\$90
• D3320	\$80	\$80	\$100	\$120	\$145	\$160
• D3330	\$150	\$150	\$175	\$200	\$225	\$250
• D4210	\$35	\$35	\$50	\$75	\$100	\$125
• D4260	\$250	\$275	\$300	\$325	\$350	\$400
• D4341	\$15	\$25	\$30	\$35	\$40	\$50
• D5110/D5120	\$100	\$125	\$150	\$175	\$200	\$250
• D5730	\$20	\$25	\$25	\$40	\$45	\$50
• D7210	\$15	\$20	\$25	\$30	\$40	\$50
• D7240	\$90	\$95	\$105	\$115	\$125	\$130
• D8070	\$1,950	\$1,950	\$1,950	\$1,950	\$1,950	\$1,950
• D8090	\$2,250	\$2,250	\$2,250	\$2,250	\$2,250	\$2,250
• D9972	\$125	\$125	\$125	\$125	\$125	\$125

¹Advantage 85 plan is available to employer groups with a minimum of 100 eligible employees. This plan must be sold on an employer-paid basis.

²Advantage 115, 175 and 275 plans are available to employer groups with 51 or more eligible employees.