

Your Dental Benefit Summary

2024 City of Seattle Plan-Local 77

Plan Features	Your Dental Health Services Benefits
Calendar Year Deductible	\$0
Annual Maximum	No Annual Maximum
Diagnostic & Preventive (routine and emergency exams, x-rays, cleaning, fluoride treatment, sealants)	Covered at 100% after \$0 office visit copayment*.
Crowns, Inlays, Onlays	\$75 plus \$0 office visit copayment* An additional amount may be charged: \$70 for noble/ \$100 for high noble/ \$125 for upgraded, specialized porcelain if applicable per unit.
Prosthodonic Services (dentures, partials, bridges)	\$0 plus \$0 office visit copayment* (dentures), \$125 plus \$0 office visit copayment* (partials, \$75 plus \$0 office visit copayment* (bridges)
	An additional may be charged: \$70 for noble/ \$100 for high noble/ \$125 for upgraded, specialized porcelain if applicable per unit.
Periodontics (surgical and nonsurgical procedures for treatment of the tissues supporting the teeth)	Covered at 100% after \$0 office visit copayment and other applicable copayments*. (\$25 copayment for 3rd and 4th periodontal maintenance at general dentist in year.)
Endodontics (treatment of tissues surrounding root of tooth)	Covered at 100% after \$0 office visit copayment and other applicable copayments*.
Oral Surgery (routine and surgical extractions)	Covered at 100% after \$0 office visit copayment and other applicable copayments*.
Orthodontia	Orthodontia cases for members under 25 years of age: \$400 copayment* plus \$150 for initial exam, study models and x-rays covers 24 months of treatment plus \$0 copayment for each visit.
	For Adult members age 25 and over: \$400 copayment* plus \$150 for initial exam, study models and x-rays covers 24 months of treatment plus \$0 copayment for each visit.
Dentist Choice	In-Network: Any contracted general dentist in the Dental Health Services network. Out- of-Network: No out-of-network coverage except for emergency dental conditions.
Femporomandibular Joint (TMJ) disorders	\$1,000 annual maximum - \$5,000 lifetime maximum
Dental Implants	Call Dental Health Services for details - not available at all locations and discounted fees apply

* Copayments may vary depending on specific procedures. Please see plan Schedule of Covered Services and Copayments for a complete list of all benefits and applicable copayments.

This plan is offered and underwritten by Dental Health Services, Inc.

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