

SUMMARY OF BENEFITS

Keep your smile healthy with affordable plans

HealthPartners
Personal Dental Plans



Dental plans to smile about

Your healthy smile is important because it's part of your total health.

One size doesn't fit all.

Use this worksheet to build a dental plan that fits your needs.

Instructions: As you browse the plans, networks and rates in this brochure simply check the boxes below. Then you can apply online at healthpartners.com/personaldental.

My dental plan

PLAN (PAGE 3-4)

- Maintenance plan
- Major plan
- Comprehensive plan

NETWORK (PAGE 5)

- HealthPartners Dental Group network (HPDG)
- HealthPartners Open Access network



We're here for you!

If you have any questions, call **952-883-5599** or **877-838-4949**.



HealthPartners Personal Dental Plans

Your first step is to choose a plan to fit your needs. You have three options: Maintenance, Major and Comprehensive.

	Maintenance Plan		Major Plan		Comprehensive Plan	
	In-Network Provider	Out-of-Network Provider	In-Network Provider	Out-of-Network Provider	In-Network Provider	Out-of-Network Provider
Annual Maximum						
Per person per calendar year Combined across in and out-of-network	\$1,250	\$750	\$1,250	\$750	\$1,250	\$750
Implant Maximum (included in Annual Maximum)						
Per person per calendar year	No coverage	No coverage	\$500	\$500	\$500	\$500
Deductible						
Applies to basic care, special care & prosthetics per person per calendar year Combined across in and out-of-network	\$50	\$75	\$50	\$75	\$50	\$75
Preventive and Diagnostic Care						
Teeth cleaning, exams, dental X-rays & fluoride treatments	100%	80%	No coverage	No coverage	100%	80%
Sealants	100%	80%	100%	80%	100%	80%
Basic Care I						
Fillings (other than posterior composite)	80%	50%	80%	50%	80%	50%
Posterior composite (white fillings on molars)	50%	50%	50%	50%	50%	50%
Simple extractions	No coverage	No coverage	80%	50%	80%	50%
Endodontics (i.e., root canal therapy)	No coverage	No coverage	50%	50%	50%	50%
Non surgical periodontics	No coverage	No coverage	50%	50%	50%	50%
Basic Care II (6 month waiting period)*						
Major oral surgery	No coverage	No coverage	50%	50%	50%	50%
Surgical periodontics	No coverage	No coverage	50%	50%	50%	50%
Special Care (12 month waiting period)*						
Crowns, crown repairs & onlays	No coverage	No coverage	50%	25%	50%	25%
Prosthetics (12 month waiting period)*						
Bridges, dentures & partial dentures	No coverage	No coverage	50%	25%	50%	25%
Bridge & denture repair	No coverage	No coverage	50%	25%	50%	25%
Dental implants	No coverage	No coverage	50%	25%	50%	25%



Benefit Details

	Maintenance Plan	Major Plan	Comprehensive Plan
	You have pretty healthy teeth. You only expect to need regular checkups and have occasional cavities.	You think you might need a bit more care, like root canals and crowns. You already have coverage for preventive care on a different plan.	You think you're somewhere in between needing regular check-ups and root canals. This is the perfect middle.
Two dental exams each calendar year.	√		√
Two dental cleanings (prophylaxis or periodontal maintenance) each calendar year.	√		√
Sealants every three years for permanent molars. Available for members of all ages.	√	√	√
Professionally applied topical fluoride once each calendar year for members under age 19.	√		√
Bitewing X-rays once each calendar year.	√		√
Full mouth or panoramic X-rays covered once every three years.	√		√
One-time oral hygiene instruction.	√		√
Space maintainers for the replacement of prematurely lost primary teeth for dependent members under age 19.	√		√
Non-surgical and surgical periodontics covered once every two years.		√	√
Replacement of crowns and fixed or removable prosthetic appliances covered once every five years.		√	√
		Certain limitations apply to repair, rebase and relining of dentures.	
		No coverage for treatment(s) that began prior to the member's effective date or completed after the termination of coverage.	
		Coverage for preventive and diagnostic care is not included in this plan.	

IMPORTANT:
Please read your Membership Contract and Appendix carefully to determine which expenses are covered.

Personal Dental plan networks

Next, think about your doctor and clinic. Residents of Minnesota may choose between two networks. Wisconsin residents get our Open Access network.

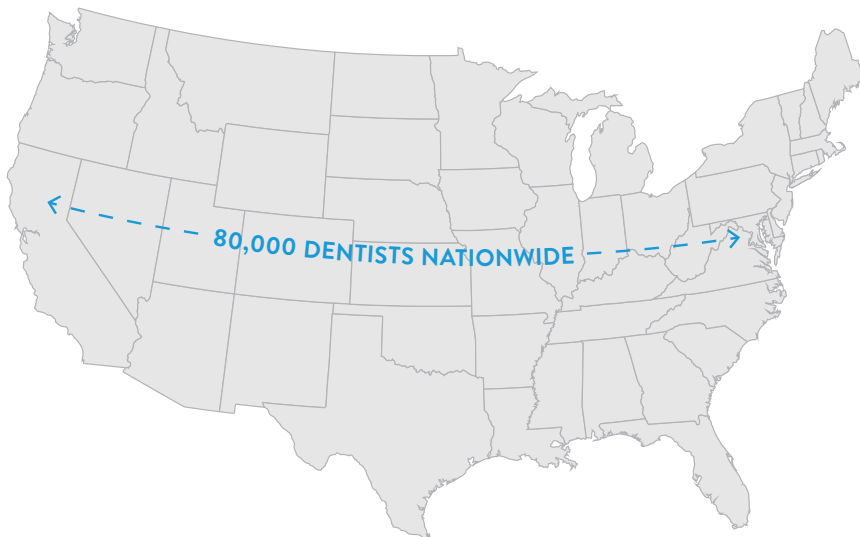
HealthPartners Dental Group (HPDG) network

With HPDG, you'll get top-notch care and a narrow network with nearly 100 dentists and specialists at clinics in the Twin Cities. Go to healthpartners.com/dentalHPDG to find a dentist.



HealthPartners Open Access network

Whether you're in Minnesota, Western Wisconsin or just about anywhere coast-to-coast, you have options to find a dentist right for you. There are more than 2,800 PPO providers throughout Minnesota and border communities and more than 80,000 providers combined across the nation. Go to healthpartners.com/personaldental to find a dentist.



Personal Dental plan rates

Finally, review rates and sign up online at healthpartners.com/personaldental. Or you can call our dedicated sales team at 952-883-5599 or 877-838-4949, or your broker.

Maintenance Plan		Major Plan		Comprehensive Plan	
HealthPartners Dental Group		HealthPartners Dental Group		HealthPartners Dental Group	
Under 50	\$28.21	Under 50	\$21.43	Under 50	\$38.46
50 and over	\$33.81	50 and over	\$25.74	50 and over	\$46.17
Dependent Rates		Dependent Rates		Dependent Rates	
1 Child	\$26.80	1 Child	\$20.36	1 Child	\$36.56
2 Children	\$53.62	2 Children	\$40.74	2 Children	\$73.12
3 or More Children	\$80.43	3 or More Children	\$61.11	3 or More Children	\$109.68
Open Access		Open Access		Open Access	
Under 50	\$34.51	Under 50	\$28.38	Under 50	\$47.16
50 and over	\$40.05	50 and over	\$34.08	50 and over	\$56.60
Dependent Rates		Dependent Rates		Dependent Rates	
1 Child	\$32.79	1 Child	\$26.96	1 Child	\$44.80
2 Children	\$65.60	2 Children	\$53.92	2 Children	\$89.60
3 or More Children	\$98.40	3 or More Children	\$80.88	3 or More Children	\$134.43

Personal Dental Plans Eligibility Rules

- Contract holder must be a Minnesota or Wisconsin resident.
- Dependent children must meet eligibility rules.
- Family members only added at open enrollment or qualifying “life events.”
- Individuals canceling coverage must wait two years to re-enroll.
- Retro-cancellation is not permitted.
- Must show proof of medical coverage. If medical coverage is terminated, dental coverage may be terminated by HealthPartners.
- Waiting periods may be waived for enrollees with proof of prior qualifying comparable coverage within 90 days of coverage; however, if you intend to keep that dental coverage this plan will be secondary and all waiting periods will apply.

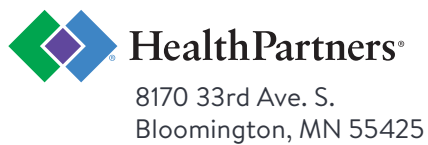


We're here for you

We're committed to answering your questions and helping you understand your options.

Call us at **952-883-5599** or **877-838-4949**,
8 a.m. to 6 p.m., Monday through Friday.

Or email us at **individualsales@healthpartners.com**.



** Rates are effective January 1, 2020 through December 31, 2020.*

Plans are underwritten and/or administered by HealthPartners family of health plans which includes, HealthPartners, Inc., HealthPartners Insurance Company and HealthPartners Administrators, Inc. Fully insured Wisconsin plans are underwritten by HealthPartners Insurance Company. 19-491094-511053 (7/19) ©2019 HealthPartners