

ALOHA AIR CARGO
HDS Dental Benefits – Group No. 2835
Effective January 1, 2015

Note: This summary includes a brief description of your HDS dental benefits. All benefits are governed by the provisions of your employer's agreement with Hawaii Dental Service and HDS's procedure code guidelines. All dental claims must be filed within 12 months of the date of service for HDS claims payment.

SUMMARY OF BENEFITS		HDS COPAYMENT PERCENTAGE	WAIT PERIOD (months)
PLAN MAXIMUM per person per calendar year		\$1000	
DIAGNOSTIC (HDS's payment for Diagnostic services will not be deducted from the member's Plan Maximum)			
• Examination – twice per calendar year		100%	N/A
• Bitewing X-rays – twice per calendar year through age 14; once per calendar year thereafter		100%	N/A
• Other X-rays (full mouth X-rays limited to once every five years)		70%	N/A
PREVENTIVE (HDS's payment for Preventive services will not be deducted from the member's Plan Maximum)			
• Cleanings – twice per calendar year		100%	N/A
• Expectant mothers – Cleanings or *Periodontal Maintenance three times per calendar year			
• Diabetic patients – Cleanings or *Periodontal Maintenance four times per calendar year			
*Periodontal Maintenance benefit level		*70%	
• Fluoride - twice per calendar year (through age 19)		100%	N/A
• Fluoride – high risk – once per calendar year		100%	N/A
• Space maintainers (through age 17)		100%	N/A
• Sealants (through age 18) – One treatment application, once per lifetime only to permanent molar with no prior occlusal restorations, regardless of the number of surfaces sealed		100%	N/A
RESTORATIVE			
• Amalgam (silver-colored) fillings		70%	N/A
• Composite (white – colored) fillings - limited to anterior (front) teeth		70%	N/A
• Crowns and gold restorations (once every seven years when teeth cannot be restored with amalgam or composite fillings)		50%	12
NOTE: Composite (white) and Porcelain (white) restorations on posterior (back) teeth will be processed as the alternate benefit of the metallic equivalent – the patient is responsible for the cost difference up to the amount charged by the dentist			
ENDODONTICS		70%	N/A
• Pulpal therapy			
• Root canal treatment, retreatment, apexification, apicoectomy			
PERIODONTICS		70%	N/A
• Periodontal scaling and root planing – once every two years			
• Gingivectomy, flap curettage and osseous surgery – once every three years			
• Periodontal Maintenance – twice per calendar year after qualifying periodontal treatment			
PROSTHODONTICS		50%	12
• Fixed bridges (once every seven years; ages 16 and older)			
• Dentures - complete and partial (once every seven years; ages 16 and older)			
• Implant Services <<implant_rule_type>>		50%	12
ORAL SURGERY		70%	N/A
ADJUNCTIVE GENERAL SERVICES		70%	N/A
• Palliative treatment (for relief of pain but not to cure)		70%	N/A

(OVER)

Access to HDS Information 24/7

Visit HDS Online at www.HawaiiDentalService.com to:

Access your online account today!

- Log on to the HDS website at www.HawaiiDentalService.com
- Click on “New User”
- Complete the “Member Registration” form
- Select “yes” to “Request electronic Explanation of Benefits”
- Click on “Register User” button
- An e-mail will be sent to you with a link. Click on the link to activate your account.

SEARCH

- For an HDS participating dentist by specialty, location, handicap accessibility, weekend hours, and more
- For a Delta Dental participating dentist in the Mainland, Guam or Saipan

DOWNLOAD & PRINT

- A summary of your benefits for tax purposes
- Blank claim forms
- An HDS identification card
- HDS Notice of Privacy Practices

CHECK

- Whether you and/or your dependents are eligible for HDS benefits
- What services are covered by your plan
- What the limits are of each type of covered service and how much you have used

VIEW

- Your own tooth chart- see what services have been performed on each tooth
- Your EOB statements (and print them out)
- A list of frequently asked questions
- HDS contact information

REQUEST

- To receive an e-mail when your claim is processed
- To receive EOB statements through e-mail
- An HDS identification card to be mailed to you

How to Contact HDS

Customer Service Representatives

From Oahu: 529-9248

Toll-free: 1-800-232-2533, ext. 248

Fax: 529-9366

Toll-free fax: 1-866-590-7988

Monday through Friday

7:30 a.m. – 4:30 p.m.

Hawaii Standard Time

Send Written Correspondence to:

Hawaii Dental Service

Attn: Customer Service

700 Bishop Street, Suite 700

Honolulu, HI 96813-4196

E-mail: HDSCustomerService@HawaiiDentalService.com