

**City of Renton - Group 4034**  
**Plans: 4034A, 4034AB, 4034D and 4034DV**

**Benefits Effective 1/1/2023 - 12/31/2023**

**Note: Benefits quoted and pre-authorizations obtained are not a guarantee of claim payment.**  
**Claim payment will be based upon eligibility at the time of service and all the terms and conditions of the plan.**  
**Out of Network services are subject to usual and customary allowances.**

<b>Dental</b>	<b>Regular Plans Preferred/PAR</b>	<b>Regular Plans Out of Network</b>	<b>Comments</b>
PPO Network	HMA Dental	Not Applicable	
Deductible	None	None	
Dental Maximum	\$2,000 – Individual Calendar Year Maximum	\$2,000 – Individual Calendar Year Maximum	Type I services do not apply toward the individual calendar year maximum.
Alternative Treatment	Applies	Applies	If alternate services or supplies are used to treat a dental condition, covered dental expenses will be limited to the services and supplies which are customarily employed nationwide to treat the dental condition.
Lost Tooth Clause	Applies	Applies	A covered person may have lost one or more teeth before he became insured by this plan. Treatment is not covered for prosthetic devices which replace such teeth unless the device also replaces one or more natural teeth lost or extracted after the person became insured under the plan.
Dental Bill Audit Incentive	Paid at 50% of the savings	Paid at 50% of the savings	Limited to \$500 per incident.
<b>Preventive Type I Services</b>			
Bite-Wing x-rays	Paid at 100%	Paid at 80%	Limited to twice per calendar year.
Complete Series or Panoramic	Paid at 100%	Paid at 80%	Limited to once every 36 months.
Emergency Oral Examination	Paid at 100%	Paid at 80%	
Extraoral X-ray	Paid at 100%	Paid at 80%	
Fluoride Treatments	Paid at 100%	Paid at 80%	Limited to twice per calendar year to age 19.
Nightguards	Paid at 100%	Paid at 80%	Limited to one every 36 months
Occlusal x-rays and Cephalometric x-rays	Paid at 100%	Paid at 80%	
Oral Exam	Paid at 100%	Paid at 80%	Limited to twice per calendar year.
Oral Hygiene Instruction	Not Covered	Not Covered	
Palliative Treatment	Paid at 100%	Paid at 80%	
Periapical x-rays	Paid at 100%	Paid at 80%	
Prophylaxis	Paid at 100%	Paid at 80%	Limited to twice per calendar year.
Sealants	Paid at 100%	Paid at 80%	Limited to age 19.
Space Maintainers	Paid at 100%	Paid at 80%	Benefit is also eligible under the Orthodontia benefit if Orthodontia related.
<b>Type II Services</b>			

<b>Dental</b>	<b>Regular Plans Preferred/PAR</b>	<b>Regular Plans Out of Network</b>	<b>Comments</b>
Alveoplasty	Paid at 100%	Paid at 80%	
Apicoectomy and Retrograde filling	Paid at 100%	Paid at 80%	
Bacteriologic cultures	Paid at 100%	Paid at 80%	
Biopsy	Paid at 100%	Paid at 80%	
Bonded fillings, Laments, and veneers	Paid at 100%	Paid at 80%	
Build-ups	Paid at 100%	Paid at 80%	
Consultation	Paid at 100%	Paid at 80%	
Crowns	Paid at 100%	Paid at 80%	Subject to the 5 year Replacement clause.
Extractions and Oral Surgery	Paid at 100%	Paid at 80%	
Frenectomy	Paid at 100%	Paid at 80%	
General Anesthesia	Paid at 100%	Paid at 80%	
Grafts	Paid at 100%	Paid at 80%	
Incision and Drainage	Paid at 100%	Paid at 80%	
Inlays/Onlays	Paid at 100%	Paid at 80%	
Nitrous Oxide	Not Covered	Not Covered	
Occlusal Adjustments	Paid at 100%	Paid at 80%	Benefit is also eligible under TMJ Dental when related to TMJ.
Pathology	Paid at 100%.	Paid at 80%	
Periodontal Appliance	Paid at 100%.	Paid at 80%	
Periodontal Examination	Paid at 100%	Paid at 80%	
Periodontal Gingivectomy	Paid at 100%	Paid at 80%	
Periodontal Osseous/ Mucogingival Surgery	Paid at 100%	Paid at 80%	
Periodontal Prophylaxis/ Maintenance	Paid at 100%	Paid at 80%	
Periodontal Scaling and Root Planing	Paid at 100%	Paid at 80%	
Periodontal Subgingival Curettage	Paid at 100%	Paid at 80%	
Pin Retention	Paid at 100%	Paid at 80%	
Pulp Vitality Test/Pulpotomy	Paid at 100%	Paid at 80%	
Removal of a Cyst	Paid at 100%	Paid at 80%	
Restorations – Amalgam	Paid at 100%	Paid at 80%	
Restorations – Composite	Paid at 100%	Paid at 80%	
Restorations – Plastic	Paid at 100%	Paid at 80%	

<b>Dental</b>	<b>Regular Plans Preferred/PAR</b>	<b>Regular Plans Out of Network</b>	<b>Comments</b>
Restorations – Porcelain	Paid at 100%	Paid at 80%	
Restorations – Silicate	Paid at 100%	Paid at 80%	
Restorations – Synthetic	Paid at 100%	Paid at 80%	
Root Canal Therapy	Paid at 100%	Paid at 80%	
Sedative Fillings	Paid at 100%	Paid at 80%	
Stainless Steel Crowns	Paid at 100%	Paid at 80%	
Therapeutic Drug Injection	Paid at 100%	Paid at 80%	
<b>Type III Services</b>			<b>5 Year Replacement Clause applies.</b>
Bridges	Paid at 80%	Paid at 50%	
Bridges – Precision Attachment	Not Covered	Not Covered	
Denture Adjustments	Paid at 80%	Paid at 50%	Eligible if performed more than 6 months after initial placement, then limited to once every 12 months.
Dentures Full or Partial	Paid at 80%	Paid at 50%	
Denture Rebasing	Paid at 80%	Paid at 50%	Rebasing of present dentures, but only if they were installed more than six months earlier and if they have not been rebased during the past thirty-six months.
Denture Relining	Paid at 80%	Paid at 50%	Relining of present dentures, but only if they were installed more than six months earlier and if they have not been relined during the past twelve months.
Denture Tissue Conditioning	Paid at 80%	Paid at 50%	
Diagnostic Cast/Study Models	See Orthodontia benefit.	See Orthodontia benefit.	
Implants	Paid at 80%	Paid at 50%	Not to exceed the amount that would be allowed for fixed bridgework that would restore the missing tooth.
Provisional Splinting	Not Covered	Not Covered	
Recementing Bridges, Crowns, Inlays/Onlays, and Dentures	Paid at 80%	Paid at 50%	
Repair Bridges, Crowns, Inlays/Onlays, and Dentures	Paid at 80%	Paid at 50%	
<b>TYPE IV Services</b>			
Orthodontia	Paid at 50%	Paid at 50%	Limited to a \$2,000 lifetime maximum. Benefit does not apply to the Dental Calendar Year Maximum.
TMJ	Paid under Medical	Paid under Medical	