

Dental



The Western Healthcare Insurance Trust (WHIT) has partnered with Willamette Dental plan to provide an affordable, quality dental plan option offered through wholly-owned Willamette Dental Clinics. While the Willamette Dental plan option alone can meet most employees' dental needs, many employers opt to give their employees a dental plan choice by offering a Willamette Dental plan as a dual choice option with Washington Dental Service (WDS).

WHIT offers the Willamette Dental managed dental care program for groups with 10 to 1,000 covered employees, with copay-based plan designs that include orthodontia coverage for adults and children. Because this is a managed program, dental care is covered only when it is provided by a dentist or specialist at a Willamette Dental office in Oregon, Washington, Idaho or Nevada.

All WHIT benefit plans include a January 1 anniversary, on which date rate adjustments are effective. New coverage is available throughout the calendar year, but premium rates may be guaranteed for less than 12 months.

Why Willamette Dental?

Willamette Dental is a leading dental carrier in the Northwest, providing plan participants with an extensive network. When Willamette Dental members visit one of the more than 60 offices in Washington, Oregon, Idaho and Nevada, they receive care from highly credentialed dentists, hygienists and dental assistants. Each of these professionals adheres to Willamette Dental's evidence-based treatment philosophy. Most offices are open Monday through Saturday from 7:00 am to 6:00 pm. Emergency dental care is covered, up to the contracted amount.

The Plan offers no annual maximums, no deductibles and no waiting periods, along with extensive coverage for preventative services and low out-of-pocket costs for major services. Orthodontia is covered for adults and children, with no age limit.

Features of the Willamette Dental Plan

There are a number of important things to know about the Willamette Dental plan:

- ▲ Dental care will only be covered when it is provided by a dentist or specialist at a Willamette Dental office.
- ▲ Willamette Dental will coordinate benefits with other dental plans.

- ▶ Plan coverage is extended if the patient is referred to an outside dentist or specialist by the Willamette Dental dentist. Co-payments remain the same as if care had been received by a Willamette Dental provider.
- ▲ While enrolled patients are encouraged to establish a long-term relationship with their primary Willamette Dental dentist, they are free to change to another Willamette Dental dentist or location at any time.

Check the Willamette Dental web site for a complete list of office locations: http://www.willamettedental.com

Why WHIT?

WHIT, the Western Healthcare Insurance Trust, provides unique and competitive employee benefit solutions for member hospitals, medical clinics and other healthcare groups.

WHIT offers:

- ▲ Competitive rates and customized, targeted solutions designed to meet the unique benefit needs of WHIT members
- Partnership with 'best in class' insurance carriers with proven experience like Willamette Dental plan
- ▲ Long-term rate stability
- ▲ Flexible billing and enrollment requirements
- ▲ Exceptional customer service through our third-party administrator, Zenith Administrators, Inc.
- ▲ Financial advantages of a Trust, since all financial gains are invested back into WHIT's programs to enhance benefits and services
- ▲ Pooled experience and renewals with other participating WHIT groups, which results in the best overall rate for all involved

Founded in 1976 by members of the Washington State Hospital Association (WSHA), WHIT now provides benefit coverage for health care organizations with 10 or more employees in Washington, Oregon, Alaska, Idaho and Montana.

Willamette Dental Plan Details

- ▲ No annual deductible
- ▲ No annual maximum
- ▲ \$10 co-payment per general office visit

Benefit	Co-Payment	Benefit	Co-Payment
Diagnostic And Preventive Services			
Routine and Emergency Exams	Covered at 100%	All X-rays	Covered at 100%
Teeth Cleaning	Covered at 100%	Fluoride Treatment	Covered at 100%
Sealants	Covered at 100%	Head and Neck Cancer Screening	Covered at 100%
Oral Hygiene Instruction	Covered at 100%	Periodontal Charting	Covered at 100%
Periodontal Evaluation	Covered at 100%		
Restorative Dentistry			
Fillings (Amalgam)	Covered at 100%	Stainless Steel Crown	Covered at 100%
Porcelain-Metal Crown	Covered at 100%		
Prosthetics			
Complete Upper or Lower Denture	\$200	Bridge (per Tooth)	Covered at 100%
Endodontics And Periodontics			
Root Canal Therapy – Anterior	Covered at 100%	Root Canal Therapy – Bicuspid	Covered at 100%
Root Canal Therapy – Molar	Covered at 100%	Osseous Surgery (per Quadrant)	Covered at 100%
Root Planing (per Quadrant)	Covered at 100%		
Oral Surgery			
Routine Extraction (Single Tooth)	Covered at 100%	Surgical Extraction	Covered at 100%
Orthodontia			
Pre-Orthodontic Service	\$150**	Comprehensive Orthodontia	\$2,000
Miscellaneous			
Local Anesthesia (Novocain)	Covered at 100%	Dental Lab Fees	Covered at 100%
Nitrous Oxide	\$20 per Visit	Specialty Office Visit	\$30 per Visit
Emergency Office Visit During Office Hours	\$50 per Visit		
Out of Area Emergency Care Reimbursement Up to \$100			
*TMJ has a \$1,000 annual maximum / \$5,000 lifetime maximum			

^{**}Fee credited towards comprehensive orthodontic co-payment if patient accepts treatment plan.

This plan provides extensive coverage of services and supplies to prevent, diagnose and treat diseases or conditions of the teeth and supporting tissues. Presented are just some of the most common procedures covered in your plan. Please see the Certificate of Coverage for a complete plan description, limitations and exclusions.

