

LIMITATIONS

Dental Health Options (DHOs) offer coverage for many services, but some restrictions apply. Coverage for some procedures is limited by age, frequency, or specific teeth. Change of coverage or reinstatement of coverage does not eliminate frequency limitations.

The following are some of the limitations associated with this plan. For a complete list, refer to the Planbook.

- *Charges for more than two examinations, of any procedure code combinations, are not allowable within any consecutive 12 month period. The 12 month period is NOT based on contract year or calendar year.*
- *Routine teeth cleaning and applying fluoride are covered every 6 months.*
- *X-rays of your whole mouth will be paid by HRI once every 4 years. Cavity-checking x-rays (bitewings) are covered once per 12 months. Obviously, x-rays should be taken as often as your particular need indicates.*
- *Fillings will not be covered if they are replacements with in 3 years of the original or placed within 3 years of a crown.*

For work in progress, HRI recognizes the American Dental Association's definition for the date of service/payment.

Provider dentists are independent contractors and are not HRI employees.

Although reasonable effort has been made to represent the intent of contract language, the Master Group Contract controls the relationship of the parties at all times.

GENERAL EXCLUSIONS

All DHOs are issued subject to the following general exclusions.

1. Within the HRI service area, claims will not be paid for services rendered by dentists who are not contractual providers for HRI, except for emergency services performed at least 50 miles from the nearest office of any provider dentists.
 2. To be considered for payment, a claim must be submitted within 1 year from the date of service.
 3. HRI will not pay claims for the following:
 - Procedures which are not listed in the employer's Master Group Contract.
 - Dental services rendered before the effective date of coverage or after the last day in which coverage terminated.
 - Dental services covered under non-dental insurance.
 - Charges made by hospitals.
 - Services performed primarily to rebuild occlusion or for full mouth reconstruction.
 - Claims for enrollees until HRI receives the appropriate premium payment.
 - Claims for services which are not completed.
 - Claims for duplicates, lost, or stolen prostheses or appliances.
 - Claims for persons 19 years or older unless they are listed as dependents for federal income tax purposes, are unmarried, are enrolled as full-time students (12 or more hours) at an educational institution, and are under 23 years of age.
- Dependents who suffer a permanent physical or mental disability which precludes their gainful employment may qualify for coverage beyond the 19 years of age stipulation. However, HRI accepts each employer's definition of "dependent". Such definition has precedent over HRI's criteria.

MAXIMUM ANNUAL BENEFITS

Contact agent or benefit provider.

In 1986, a group of dedicated dentists recognized the need for a quality dental plan for employer groups. As practicing dentists, this group understood the concerns of their patients. You, the patient, desire high quality care when you need it and at affordable rates. You like the freedom to choose your own dentist and don't want a dental plan that makes you change. You want dental plans that are easily understood and for claims to be paid promptly. You want administrators of a dental plan to treat you fairly and with understanding.

Health Resources, Inc. was founded with these principles in mind. Over the years we have expanded and made additional improvements to our dental coverage. You have the freedom to choose your own participating dentists. There are no deductibles. Exams, x-rays, and preventive services are covered at 100%. We provide coverage for pre-existing conditions. Our dental plans offer a broad range of coverage with the best possible value.

Our mission statement is, "To improve the dental health of the public through the use of prepaid dental plans." And for twenty years that is exactly what we have delivered to our subscribers. We look forward to continuing that promise to our customers. I hope that you feel as excited as I do about Health Resources, Inc.'s Dental Health Options and enroll today!

Sincerely,



Allan L. Reid, DMD, MBA
President/Chief Executive Officer

ENROLLMENT INFORMATION



HEALTH
RESOURCES, INC.

E13050106

CORPORATE
800-727-1444
www.HRI-DHO.com

Southern Indiana Sales
(812)-424-1444

Northern Indiana Sales
(574)-206-8844

Western Kentucky Sales
(270)-393-2131

Indianapolis Sales
(317)-578-7960

DENTAL HEALTH OPTION 3

CONGRATULATIONS! You and your family have the opportunity to enroll in Dental Health Options through Health Resources Inc (HRI).

Members using participating providers enjoy

- No deductibles.
- No claim forms.
- No pre-existing condition clauses.
- No balance billing.
- A large dentist network, including specialists.
- Exams, x-rays, routine cleanings, and fluoride covered at 100% with few limitations.
- High maximum annual benefits.

Review a current list of Provider Dentists and use this extensive network. If you live or work in a county where there are no participating dentists, HRI will provide coverage for services from any dentist in either county.

Complete and submit a Subscriber Enrollment Application to begin coverage. **NO ONE MAY ADD, DROP OR CHANGE COVERAGE DURING EACH CONTRACT PERIOD** unless a change of family status or employment termination occurs.

As a subscriber, you will receive ID cards. You may also access a detailed PlanBook of covered procedures, verify coverage, or check on claims for you and your covered dependents on our web site at any time of day.

Every time you use Dental Health Options, you will receive an Explanation of Benefits that confirms claim status too.

For more information, contact a participating dentist, your employer, an HRI office, or www.HRI-DHO.com.

DENTAL SERVICES COVERED AT 100%

DIAGNOSTIC SERVICES

Examinations
 Periodic, limited, comprehensive, periodontal
 Radiographs (x-rays)
 Complete series (full mouth x-rays)
 Panoramic films
 Single x-ray(s)
 Cavity checking
 Cephalometric film

DIAGNOSTIC SERVICES (cont.)

Other procedures
 Pulp vitality tests
 Diagnostic casts
 Diagnostic photographs

PREVENTIVE SERVICES

Routine teeth cleaning
 Fluoride applications
 (no age restrictions)

PREVENTIVE SERVICES (cont.)

Sealants (under 15 years of age, permanent molar teeth only)
 Space maintainers (not orthodontic retainers)
 Fixed, unilateral, and bilateral
 Removable, bilateral
 Recementation

DENTAL SERVICES COVERED AT 80%

FILLINGS

Silver fillings
 Primary teeth
 Permanent teeth
 White fillings
 Anterior teeth
 Posterior teeth

ROOT CANAL WORK

Anteriors
 Premolars
 Molars
 Retreatment

ORAL SURGERY

Extractions
 Routine removals or exposed roots

DENTAL SERVICES COVERED AT 50%

FILLINGS

Inlay/Onlay (gold and porcelain)

CROWNS

Crowns (single tooth only)
 Porcelain/ceramic jackets ("caps")
 Full cast
 3/4 cast
 Prefabricated stainless steel (baby teeth)
 Recementation

ROOT CANAL WORK

Vital pulpotomy (baby teeth only)
 Pulp therapy (baby teeth only)
 Apexification
 Periapical procedures
 Apicoectomy
 Retrograde filling
 Root amputation
 Other Procedures
 Hemisection
 Preparation for post

PERIODONTIC SERVICES

Gingivectomy, per quadrant
 Crown lengthening
 Osseous surgery
 Soft tissue grafts
 Distal or proximal wedge
 Sealing and root planing
 Full mouth debridement
 Periodontal maintenance

REMOVABLE PROSTHODONTICS

Complete dentures / Immediate dentures
 Partial dentures
 All acrylic
 Metal framework, acrylic saddles
 Other procedures
 Repairs
 Reline
 Tissue conditioning

FIXED BRIDGEWORK

Bridge pontics
 High noble, base and semiprecious metal porcelain
 Resin bonded (Maryland) bridge
 Bridge retainers
 Porcelain
 3/4 cast

PERIODONTIC SERVICES

Full Cast
 Other services
 Recementations
 Post and core
 Cast coping

ORAL SURGERY

Surgical removals
 Impactions
 Tooth reimplantation
 Surgical exposure of unerupted tooth
 Biopsy, soft tissue
 Alveoloplasty (smoothing of bone)
 Incision and drainage of abscess (intraoral)
 Frenectomy
 Excise hyperplastic tissue (removal of excess gum tissue)

ADJUNCTIVE SERVICES

Palliative emergency treatment
 Anesthesia
 General anesthesia
 Intravenous sedation
 Analgesia (nitrous oxide)
 Other procedures
 Athletic mouthguards
 Bleaching (anterior teeth, supervised in office)