

Dental Overview

The Health Net Dental Plan provides convenient coverage for preventive, basic and major dental care, and diagnostic services. These dental services are coordinated by your primary care general dentist. There's no charge for preventive care, and additional services are provided at varying copayments.



What's covered

Type of service	What you pay
Office visits to a Health Net participating dentist/dental facility	\$0 copay
Teeth cleaning (2 cleanings per calendar year)	\$0 copay
X-rays (bitewings, 2 or 4 films) (full mouth)	\$0 copay \$0 copay



Please refer to your *Evidence of Coverage (EOC)* for a complete schedule of copayments and services.



How to use the dental plan

- For assistance in selecting a dental provider, call the Customer Service number listed on the back of this flyer.

(continued)

Liability for payment

You are responsible for paying for any services you receive from a dentist not affiliated with the Health Net Dental Plan. You also will be charged for any services you receive that exceed the benefits covered under this plan.

What's not covered

EXCLUSIONS AND LIMITATIONS

- More than one full-mouth X-ray in a two-year period;
- More than two teeth cleanings per calendar year;
- Any other exclusions listed in the EOC.

In addition to the exclusions and limitations listed above, dental care benefits are subject to the plan's general exclusions and limitations.



If you have any questions, please contact the Customer Service Department of Health Net Dental at **1-866-249-2382** (TTY users should call **711**), Monday through Friday, 5:00 a.m. to 8:00 p.m. Pacific time (PT), excluding holidays. Interpreter services are available by calling our Customer Service Department.

Health Net is contracted with Medicare for HMO plans. Enrollment in Health Net depends on contract renewal.