

Dental Services	Ramsey County Tiered Network Plan			Ramsey County Narrow Network Plan
	Benefit Level 1	Benefit Level 2	Benefit Level 3	In network
Calendar Year Annual Maximum – combined across all tiers	\$3,000	\$1,200	\$1,200	unlimited
Annual Deductible	none	\$25/ person \$75/ family	\$25/ person \$75/ family	none
Preventive/Diagnostic Care	100%	100%	100%	100%
Sealants	100%	100%	100%	100%
Basic I Services				
• Fillings	100%	100%	100%	100%
• Posterior Composite	80%	80%	60%	80%
• Simple Extractions	100%	100%	100%	100%
• Non-surgical Perio	100%	100%	100%	100%
• Endodontics	100%	100%	100%	100%
Basic II Services				
Surgical Periodontics	100%	100%	100%	100%
- Oral Surgery	100%	100%	100%	100%
Crowns, Onlays	80%	80%	60%	60%
Prosthetics				
Bridges &	50%	50%	50%	60%
Dentures				
Dental Implants	50% (\$1,200 maximum)	50%	50%	60% (\$1,200 maximum)
Orthodontics				
Lifetime maximum	50%			50%
for dependents under age 19	\$1,000	No coverage	No coverage	\$1,000
(combined across networks)				

This is an overview of HealthPartners coverage. Out of network coverage is also available in both plans. For exact coverage terms and conditions consult your plan materials or call Member Services at 952-883-5000 or 800-883-2177.