

Clinical Dental Plan 2024

The College has offered a unique Dental program for a number of years as a component of the employee benefits package and understands the value that many employees find in the program and its ease of use.

The Dental Plan is intended to offer a range of dental services to employees designed to promote and support good dental health amongst the Haverford community. As the services provided are not comprehensive, please know that they do not cover the full range of dental procedures an employee, partner, or dependent may need. The list of covered dental services is available on the following pages and on the Human Resources website.

In 2017, the College initiated a small cost share component for employees (and their partners and dependents) who elect to participate in its dental plan. This cost share component will be modestly increasing in 2024 as a way to provide some support financially in the continuation of the dental program. The College retains the discretion and right to change, alter, or conclude the dental program or its benefits, if desired, in the future.

Full-time and part-time benefit eligible employees (working 1000 hours per year) may participate in the Dental Plan upon date of hire or during the annual Open Enrollment period. Eligible employees, their spouses or domestic partners, and dependents including children up to age 26, are eligible for coverage under this plan.

The doctor-patient relationship between the panel dentist and the employee remains primary and the College does not play a role in this relationship. As such, the College has not undertaken a clinical, or other-type of, review of the dentists/dental practices. Each participating employee should continue to conduct his/her own review and diligence. The dental program is entirely voluntary.

To enroll, employees must elect the Dental Plan as a new hire, or during the annual Open Enrollment period. Monthly cost share amounts are shown below and will be deducted as an after-tax payroll deduction. The premium cost share is a fixed monthly amount for the calendar year and is not related to the number of dental visits or covered services provided. Note, your premium is not refundable even if you do not use the dental panel during the year.

*ID cards are not issued – the Dental Panel receives an updated list of eligible employees and dependents on a regular schedule from the Office of Human Resources.

Dental Panel Rates for Calendar Year 2024

(Monthly Cost Share / Premium)

Salary Tier	Employee Only	Employee + 1 Dependent	Employee + 2 or More Dependents
1 (Below \$51,000)	\$4.12	\$7.47	\$8.76
2 (\$51,000 - \$102,000)	\$9.54	\$13.92	\$15.21
3 (Above \$102,000)	\$17.01	\$21.39	\$22.68

Dental Panel Participating Offices:

Bryn Mawr Dental Associates	934 Haverford Road, 2 nd Fl. Bryn Mawr, PA 19010	610-527-2469
Bryn Mawr Dental Health Group	19 Morris Avenue Bryn Mawr, PA 19010	610-525-4910
Main Line Family Dentistry	931 Haverford Road Bryn Mawr, PA 19010	610-525-2311
Dr. Geoff Donoho	54 Rittenhouse Place Ardmore, PA 19003	610-649-7670
Pediatric Specialist	780 Lancaster Avenue	610-527-2434
Robin D. Harshaw &	Suite 1000	
Associates	Bryn Mawr, PA 19010	

Dental Services Provided

The Dental Plan includes two cleanings per year and x-rays once a year. A detailed list of the covered services is included below and also found on the Human Resources website.

*Referrals to specialists are/can be made by the participating primary dental practices. Payment for "covered services" from those specialists are typically arranged by the referring primary dental panel provider and billed to the College.

Services that are <u>not covered</u> under the College's plan are the responsibility of the employee (member). Panel Dentists will provide you with information and costs for such non-covered services.

DENTAL SERVICES PROVIDED:

The services listed below are covered under the College's plan and the costs are covered per the costshare listed above. Services that are not listed here aren't covered under the College's plan and employees are responsible for the full cost of those services.

Diagnostic

Periodic Exam
Limited oral evaluation
Comp Oral Exam-new patient
Comp Oral Exam-pedo
Limited re-evaluation est patient
Full mouth x-rays
Single x-ray

Additional x-ray

Occlusal x-ray
Extraoral-first film
Extraoral-each additional film

Bitewing-single film Bitewing-two films Bitewing-4 films

Vertical bitewings-7 to 8 films
Panographic x-ray
Cephalometric film
Cone Beam CT-Craniofacial Data*
Cone Beam CT-2D multi img reconst
Pulp vitality test
Diagnostic casts
Diagnostic photographs

Prophylaxis

Prophy-adult
Prophy-child
Fluoride treatment (child)
Fluoride treatment (adult)
Topical application of fluoride
Oral hygiene instruction
Scalants, per tooth
Periodontal maintenance

Endodonics

Direct pulp cap Indirect pulp cap Pulpotomy Root canal- 1 canal Root canal- 2 canals Root canal- 3 canals Root canal- 4 canals

Pulpal therapy-anterior primary

Pulpai therapy-posterior primary Root canal therapy-anterior Root canal therapy-bicuspid

Root canal therapy-molar Refreat, prev RCT - anterior Refreat, prev RCT - bicuspid

Retreat, prev RCT - molar
Apexification/recalcif, initial
Apexification/recalcif, interim
Apexification/recalcif, final
Apicoectomy
Canal prep.fit of dowel/post
Distal/proximal wedge procedure

Palliative and other

Emerg treatment, palliative
Palliative (Emer) Pain treatment
Consultation
Office visit after reg hours
Appl/desens per quad
Appl/desensitizing resin, per th
desensitizing

Occlusion

Occlusal guard
nti occlusional guard
interra occl guard
Occlusal adjustment-limited
Occlusal adjustment-hyg

Periodontics

Scaling & Root planing—quadrant
Scaling & Root planing—1-3
teeth
full mouth debridement
Chemotherapeutic agent—1 site
Chemotherapeutic agent—quadrant
ARESTIN Q-per quad 8-10 sites
Actisite
arestin (1 mg) done/prevent
further
Periodontal maintance

Restorative

Amalgam-1 surface primary Amalgam-2 surface primary Amalgam-3 surface primary Amalgam-4+ surface primary Amalgam-1 surface Amalgam-2 surfaces Amalgam-3 surfaces Amalgam-4 surfaces Composite-1 surface, anterior Composite-2 surfaces, anterior Composite-3 surfaces, anterior Comp 4+ w/incis angle ant Resin-1 surface, poster primary Resin-2 surface, poster primary Resin-3 surface, poster primary Comp-1 surface, post-perm Comp-2 surfaces, post-perm Comp-3 surfaces, post-perm Comp-4 surfaces, post-perm Resin composite, 1 surf posterior Resin composite, 2 surf posterior Resin composite, 3 surf posterior Resin composite, 4+ surf posterior Re-cement inlay/onlay/partial Re-cement crown Re-cement veneer Pre-fab stain steel crn-primary Pre-fab stain steel crn-perm Sedative filling Crown build-up, incl any pins Pin retention Cast post&core in add to crown Prefab post&core in add to crn Post removal (not with endo) Re-cement bridge (fixed partial depture)

Surgery

Extraction
Extraction- crul remnts-decid th
Additional extraction
Root removal
Extract, erupted th/exposed rt
Extraction-surgial/erupt tooth
Surgic removal resid tooth root
Biopsy

Prosthetics

Denture adjustment-maxil Denture adjustment-mand Partial adjustment-maxil Partial adjustment-mad Denture Repair-complete base Replace teeth-comp dent Repair resin denture base Repair cast framework Repair/replace broken clasp Replace broken teeth-per tooth Add tooth to exist part denture Recement fixed partial denture Cast post/core, + brdg retainer Cast post/part of brdg retainer Prefab post/core + bridg retainer Core buildup for retain, inc pin