

DIVISION 1181 A.T.U. N.Y. WELFARE FUND & PLAN
101-49 WOODHAVEN BLVD.
OZONE PARK, N.Y. 11416

SECTION 8
DENTAL BENEFITS
Effective June 1, 2010

The Fund pays up to a maximum of \$2,000 per year for Dental expenses incurred by each Participant and Eligible Dependent in accordance with the Schedule of Dental Benefits that appears below.

SCHEDULE OF DENTAL BENEFITS

<u>DESCRIPTION OF PROCEDURE</u>	<u>FUND ALLOWANCE</u>
DIAGNOSTIC	Effective 6/1/2010
Oral Examination	
Consists of charting, completion of forms and oral examination (twice per year)...	\$ 30.00
Radiographs	
Complete intra-oral series (consists of 14 periapical and four bite-wing films once every three years)	\$ 50.00
Intra-oral single first film (periapical)	\$ 5.00
Intra-oral each additional periapical film	\$ 2.00
Four regular bite-wing films	\$ 15.00
Two regular bite-wing films -	\$ 10.00
Single regular bite-wing film	\$ 5.00
Panorex (once every 3 years)	\$ 50.00
Occlusal films (usually used in edentulous cases) each	\$ 15.00
Lateral jaw x-ray to be used as aid to complex surgical procedures	\$ 50.00
Anterior-posterior x-ray of head and jaw (justification required) for specialists only	\$ 50.00
* Note: Total of individual films may not exceed allowable for complete series.	
PREVENTIVE	
Oral Prophylaxis (twice per year)	
Adults (12 years of age and over)	\$ 25.00
Children (under age 12)	\$ 15.00
Scaling, curettage, and root planning \$20.00 per quadrant / \$320.00 maximum per year	

Fluoride treatments - ages 4 to 14 years: Topical application of stannous fluoride - two treatments annually	\$ 20.00
Sealants ages 4 to 14 on posterior permanent teeth	\$ 15.00

Space Maintainers

Fixed, Band type	\$ 50.00
Fixed Stainless Steel Crown Type	\$ 50.00
Removable Cast-chrome Cobalt types (with clasps)	\$ 70.00
Removable Acrylic Type (with clasps)	\$ 60.00

RESTORATIVE

Amalgam Restorations

Amalgam - one surface	\$ 25.00
Amalgam - two surfaces	\$ 35.00
Amalgam - three surfaces or more	\$ 50.00

Composite Restorations or similar accepted materials (per restoration)

One surface	\$ 35.00
Two surface	\$ 45.00
Three surfaces	\$ 55.00
Four surfaces or more	\$ 75.00

Double occlusal fillings are considered one restoration. Slight buccal and lingual extensions of occlusal surface are considered one restoration. Cement bases, pulp capping, acid etch, and all protective agents are included in fee for restoration. Posterior teeth filled with composite or similarly accepted filling materials will be paid as amalgam fillings.

Inlays

One surface	\$ 50.00
Two surfaces	\$ 60.00
Three surfaces	\$ 75.00
Recementing inlay (must be serviceable)	\$ 15.00

Reinforcement pins (Two Pins Maximum Per Tooth)

First pin	\$ 20.00
Second pin in the same tooth	\$ 10.00

Crowns (single restoration only)

Stainless steel crown	\$ 50.00
(To be used on deciduous teeth or where permanent restoration on permanent tooth is not feasible due to age of patient or enlarged pulp. Three surfaces of tooth must be involved.)	
Porcelain fused to metal crown	\$ 350.00
Laminate	\$ 250.00
Full Cast gold crown	\$ 250.00
Acrylic veneer crown	\$ 250.00
Porcelain jacket crown	\$ 250.00
Acrylic jacket (lab processed)	\$ 50.00
Three quarter crown	\$ 75.00
Recement Crowns (must be serviceable)	\$ 20.00

Palliative Treatment (emergency treatment of dental pain with no other treatment in same visit) \$ 20.00

PERIODONTAL SURGICAL PROCEDURES

Osseous surgery — Requires Prior Approval	\$ 150.00
Gingivectomy	\$ 100.00
MAXIMUM ALLOWANCE FOR PERIODONTAL SURGERY	\$ 600.00
Periodontal maintenance	\$ 50.00

Note: When multiple surgical procedures are performed in the same quadrant, only the most comprehensive will be paid.

ENDODONTICS

Pulpotomy

Limited to deciduous teeth only - If tooth is not ready to be exfoliated \$ 50.00

Root Canal Therapy Pre- and post-operative x-rays are required.

Tooth with one canal	\$ 175.00
Tooth with two canals	\$ 225.00
Tooth with three or more canals	\$ 300.00

Apicoectomy \$ 175.00

If more than one root requires apicoectomy, allowance for one root is \$175.00; allowance for second and third root is \$100.00 each root.

Crown build-up	\$ 100.00
Maryland abutment	\$ 100.00

ORAL SURGERY

Routine Extractions per tooth	\$ 50.00
Root removal (exposed root)	\$ 50.00
General Anesthesia	\$ 100.00
Incision and drainage	\$ 50.00
Frenectomy	\$ 50.00
Removal of cyst, lab report required (included in fee)	\$ 150.00

MULTIPLE EXTRACTIONS --

Surgical Extraction	\$ 75.00
Soft tissue impaction	\$ 75.00
Partial bony impaction	\$ 100.00
Completely bony impaction	\$ 150.00

Alveolectomy

Per tooth	\$ 10.00
Per quadrant	\$ 60.00
Maximum per jaw	\$ 120.00