



Orthodontia Rider

Schedule of Benefits

Benefit	Plan Pays*
Lifetime Maximum Per Person**	\$2,000
Annual Deductible Per Person	\$50
Waiting Period***	Yes

Payment Schedule	Amount Payable by HMAA
First Month	\$116.66 (after \$50 Deductible)
Per Subsequent Month	\$166.66 (for as long as treatment lasts on an eligible member, up to the \$2,000 lifetime maximum)

* The Orthodontia Rider must be purchased together with one of HMAA's Dental Plans.

** The lifetime maximum amount payable by HMAA for orthodontic benefits for an eligible member is \$2,000. Payments will be applied to your dental plan's annual maximum.

*** The orthodontia benefit is available to members who have been enrolled continuously in a dental plan with the same HMAA group for the 12 months preceding the date of service, and is limited to one course of treatment during lifetime per covered person. Payment is limited to treatment received after coverage begins. For orthodontia claims, the initial date appliances are provided is the treatment date.

In the event of termination of the treatment plan prior to completion of the case, or termination of this dental plan, no payment will be made for treatment after such termination date.

Note: This document is intended to provide a condensed explanation of benefits. Please refer to the Dental Plan documents for details. In the case of a discrepancy between this document and the language contained within the Dental Plan documents, the latter will take precedence.



Orthodontia Rider

\$2,000 Maximum Adult & Child

In addition to your HMAA dental plan benefits, your plan includes the rider option shown below. Please read the following thoroughly for a description of your HMAA orthodontia rider. Your member ID card specifies the dental plan in which you are enrolled.

Benefits

Coverage for orthodontic benefits:

- Orthodontic treatment is defined as the necessary procedures for treatment, performed by a licensed orthodontist, involving surgical or appliance therapy for movement of teeth and/or jaws, and post-treatment retention.
- Orthodontic records: Exams (initial, periodic comprehensive, detailed and extensive), x-rays (intraoral, extraoral, diagnostic radiographs, panoramic), diagnostic photographs, diagnostic casts (study models limited to once per lifetime) or one cephalometric film.
- Orthodontic benefits are considered a major service and are subject to a 12-month waiting period.
- Benefits are subject to an annual deductible of \$50 per person.
- Eligible persons are members covered under the existing dental plan.
- HMAA will pay up to \$166.66 per month.
- The lifetime maximum amount payable by HMAA for orthodontic benefits for an eligible member is \$2,000. Payments will be applied to your dental plan's annual maximum.

It is strongly suggested that an orthodontic treatment plan be submitted to and a predetermination be made by HMAA prior to commencement of treatment. A predetermination is not a guarantee of payment.

Additionally, payment for orthodontic benefits is based upon eligibility. If an individual becomes ineligible prior to the payment of benefits, subsequent payments will not be made.

Limitations

Payment is limited to:

- Completion of treatment.
- Treatment received after coverage begins. For orthodontia claims, the initial date appliances are provided is the treatment date.
- One course of treatment during lifetime per covered person.

Services must be rendered by a licensed orthodontist. HMAA will issue payment based on our responsibility for the length of the treatment. Payments are issued providing the member remains eligible.

In the event of termination of the treatment plan prior to completion of the case, or termination of this dental plan, no subsequent payment will be made for treatment incurred after such termination date.

Exclusions

- Treatment that began prior to the start of coverage is not covered or prorated.
- Charges for more than one replacement appliance.
- Charges for any repair of an appliance.
- Services considered inappropriate or unnecessary, as determined by HMAA.

This is not a contract. All covered services are subject to the conditions, limitations, exclusions, terms, and provisions of the Dental Plan Documents.

In the case of a discrepancy between this document and the language contained within the Dental Plan documents, the latter will take precedence.