



Introducing Health Access Cooperative Dental

We are not insurance, we are so much better.



We are a consumer cooperative where members access affordable dental care with none of the overhead or run-around of an insurance company.

The Health Access Cooperative Dental (or Co-op Dental) is a proven approach that allows you to stop funding insurance company profits and instead join together with other individuals to access affordable dental care on your terms.

We are truly patient-centered because we are owned and operated by the very people we serve. Customer service and satisfaction are our measures of success, not profit.



Questions?

Contact HR or your Health Access Solutions representative to learn more about this membership.

How Do We Compare To Traditional Dental Insurance Plans?

- **Lower Monthly Costs:** Member ownership means lower overhead and no profit motive. We collect only what we need to meet our members' needs and reserve for future costs.
- **Freedom To Choose Your Dental Providers:** We have no networks, which means members can see the dental providers of their choosing, it's that simple. We believe that you should pick your dental providers, not an insurance company.
- **Simple Design:** We reimburse 100% of your preventive dental expenses and 95% of your non-preventive dental care, including orthodontics, up to your annual allowance amount.
- **No Lifetime Maximum:** Your annual allowance is available every year for all eligible services, including orthodontics.

Here's How It Works:

1. Simply see the dental provider of your choosing. You never have to worry about that dentist or specialist not being in-network.
2. There is no need to present a card. Simply say you are a "self-pay" patient, submit the bill to Co-op Dental, and we will either reimburse you or pay the provider directly.
3. If you are asked for advance payment for larger dental services, simply call our member support team for assistance.

Appendix A

Examples of How Our Simple Design Saves Members Money

Example 1

Imagine a family has a child that needs to get braces (orthodontics). In year one, that child required a filling and started orthodontics.* In year two, they had regular orthodontics visits.

Over two years, if that family were Co-op Dental members they would only pay \$165, but if they had a traditional dental insurance plan, they would pay \$2,060.

Expenses:

Year 1

- Filling.....\$300
- Six Months of Ortho\$1,000

Year 2

- Ongoing Ortho\$2,000

Two-Year Total.....\$3,300

	HAS Co-op Dental	Traditional Dental Insurance Plan
	\$2,500 Annual Allowance	\$2,000 dental benefit, 100% for preventive, 80% for basic, 50% for major, 50% for ortho with \$1,000 lifetime max
Year 1	\$65 (5% of non-preventive)	\$560 (20% of filling and 50% of ortho)
Year 2	\$100 (5% of non-preventive)	\$1,500 (insurance only pays \$500 remaining of ortho lifetime max)
Total Out-of-Pocket Costs	\$165	\$2,060
	Co-op Dental pays \$3,135!	Insurance pays \$1,240

*after an initial 6-month waiting period

Example 2

In another family, an adult went to the dentist for two preventive dental cleanings and had to have a crown put on a tooth.

If that person is a Co-op Dental member, they will only pay \$75, while the same person with traditional dental insurance would pay ten times more!

Expenses:

- Cleaning\$150
- Cleaning\$150
- Crown\$1,500

Total\$1,800

	HAS Co-op Dental	Traditional Dental Insurance Plan
	\$2,500 Annual Allowance	100% for preventive, 80% for basic, 50% for major, 50% for ortho with \$1,000 lifetime max
Preventive Cleanings (2)	\$0	\$0
Crown	\$75 (5% of crown)	\$750 (50% for major)
Total Out-of-Pocket Costs	\$75	\$750
	Co-op Dental pays \$1,725!	Insurance pays \$1,050



Membership Options	Annual Allowance	Limits or Other Important Information
Option 1	\$1,500	
Option 2	\$2,500	
Eligible Preventive Dental Expenses	Co-op Dental's Responsibility	Limits or Other Important Information
Routine Exam	100% up to Annual Allowance	2 per calendar year
Bitewing X-rays	100% up to Annual Allowance	1 per calendar year
Cleaning	100% up to Annual Allowance	2 per calendar year
Fluoride Treatment (varnish only)	100% up to Annual Allowance	1 per calendar year to age 19
Panoramic X-rays	100% up to Annual Allowance	1 per 5 years
Space Maintainers	100% up to Annual Allowance	2 per calendar year to age 16
Eligible Non-Preventive Dental Expenses	Co-op Dental's Responsibility	Limits or Other Important Information
Fillings	95% up to Annual Allowance	
Crowns	95% up to Annual Allowance	
Prosthodontics, including: - Dentures - Bridges	95% up to Annual Allowance	Excludes dental implants
Prosthetic Repairs/Adjustments	95% up to Annual Allowance	
Endodontics, including: - Root Canal	95% up to Annual Allowance	
Periodontics	95% up to Annual Allowance	
Oral Surgery	95% up to Annual Allowance	
Orthodontic Services	95% up to Annual Allowance	For dependent children to age 19*
Additional Expenses	Co-op Dental's Responsibility	Limits or Other Important Information
Vision Hardware - Frames - Lens - Contacts	100% up to Annual Allowance	Up to \$200, available in the \$2,500 plan only

Exclusions

Cosmetic Procedures | Drugs and medications performed with non-surgical dental care

*after an initial 6-month waiting period