

# Dental Insurance



Kansas City Life  
Insurance Company



Group  
Benefits

**We all know good dental care is part of good medical health. That is why your employer is providing an opportunity for you to enroll yourself and your dependents in a dental plan. It's time to brush up on dental insurance.**

**Cavities (also called tooth decay) are one of the most common chronic conditions in the United States. By age 34, more than 80 percent of people have had at least one cavity. More than 40 percent of adults have felt pain in their mouth in the last year.**

Source: <https://www.cdc.gov/oralhealth/basics/index.html>

**Oral health has been linked with other chronic diseases, like diabetes and heart disease. It is also linked with risk behaviors like using tobacco and eating and drinking foods and beverages high in sugar.**

Source: <https://www.cdc.gov/oralhealth/basics/index.html>

By enrolling in dental coverage through Kansas City Life Insurance Company, you will be covered for regular exams, cleanings and other necessary dental procedures. You will have the opportunity to positively affect your oral health and possibly prevent future health problems that could derive from lacking oral care.

## Kansas City Life Dental Network

Kansas City Life Dental Alliance providers – Please visit [www.kclgroupbenefits.com/DentalProvidersSearch](http://www.kclgroupbenefits.com/DentalProvidersSearch) to obtain a list of dental providers in your area.

Monthly Premium	
Employee Only:	\$32.72
Employee+Spouse:	\$67.68
Employee+Child/ren:	\$80.52
Family:	\$115.08

# DENTAL BENEFIT SUMMARY FOR Evangelical Lutheran Education Association

All Full-time active employees working 20 hours per week year-round, who are U.S. Citizens or legal U.S. residents and are performing the duties of their occupation on their last scheduled working day immediately preceding the effective date of the plan are eligible for insurance on that effective date; spouses and unmarried children up to age 26 (may vary depending on state requirements).

Below is a listing of the coinsurance percentages for the types of available services.

Coinsurance		
In Network	Out of Network	
<b>100%</b>	<b>80%</b>	<b>TYPE I – Preventive / Diagnostic Services†</b> <ul style="list-style-type: none"> <li>• Clinical Oral Examinations</li> <li>• Bitewing X-rays</li> <li>• X-Rays</li> <li>• Prophylaxis</li> <li>• Fluoride Treatments‡</li> <li>• Sealants‡</li> <li>• Space Maintainers‡</li> <li>• Periodontal Maintenance</li> </ul>
<b>80%</b>	<b>60%</b>	<b>TYPE II – Basic Services† (no waiting period*)</b> <ul style="list-style-type: none"> <li>• Anesthesia</li> <li>• Tissue Conditioning</li> <li>• Palliative Treatment</li> <li>• Fillings</li> <li>• Simple Extractions</li> <li>• Surgical Extractions</li> <li>• Endodontics</li> <li>• Non-Surgical Periodontics</li> <li>• Surgical Periodontics</li> <li>• Oral Cancer Screening</li> </ul>
<b>50%</b>	<b>50%</b>	<b>TYPE III – Major Services† (no waiting period*)</b> <ul style="list-style-type: none"> <li>• Dentures and/or Bridgework</li> <li>• Crowns, Inlays, Onlays, Labial Veneers and Crown Buildups</li> <li>• Crown and Prosthodontic Restorative Services</li> </ul>

† The above lists are not inclusive of all services covered. The certificates of coverage will outline all benefits.

‡ For dependent children under the age of 19. Age may vary.

\* Current insured individuals will receive credit for waiting periods and/or deductibles satisfied under the previous plan. New enrollees will be subject to the benefit waiting period.

**Annual Maximum:** \$1,000 INN calendar year maximum per person | \$1,000 OON calendar year maximum per person.

**Deductible:** There is a \$50 INN / \$50 OON Annual deductible for basic and major services with a family maximum of 3. The deductible does not apply to preventive services.

## Dental Claims

Claims may be submitted electronically or by mail to:

Kansas City Life  
P.O. Box 9040  
Austin, TX 78766  
Questions should be directed to  
800-874-5254, ext. 6045.

*This is a brief description only and is not a contract. The Group Master Policy will determine all rights and benefits. For costs and further details of the coverage, including exclusions, any reductions or limitations and the terms under which the policy may be continued in force or discontinued, see your agent or write to the Company. The policy is cancellable or renewable at the option of the Company. The Company has the right to increase the premium rates. Coverage is not available in all states.*

*This outline is intended to be a summary of your benefits and does not include all plan provisions and limitations. Details of your benefits can be found in your certificate of coverage, provided to you at a later date. If there are any discrepancies between this outline and the group certificate, the group certificate governs.*

Policy and certificate referenced:  
PJ143/CJ143



**KANSAS CITY LIFE**

**GROUP BENEFITS**

Underwritten by:  
Kansas City Life Insurance Company  
3520 Broadway  
Kansas City, MO 64111-2565  
P.O. Box 219425  
Kansas City, MO 64121-9425  
Toll-free: 877-266-6767, ext. 8200  
Fax: 816-531-4648  
[groupbenefits@kclife.com](mailto:groupbenefits@kclife.com)  
[www.kclgroupbenefits.com](http://www.kclgroupbenefits.com)