



# Compass Family Services Dental Benefit Summary

Member Services 855-844-0626

Email [memberservices@skygenusa.com](mailto:memberservices@skygenusa.com)

Members can access their ID Card and plan information at  
[www.directdentalplans.com](http://www.directdentalplans.com) by clicking Login > Members

## Dental Benefit

Plan Year	January 1 – December 31
Individual Annual Deductible	\$25 per person after the first \$250 of treatment
Annual Benefit Maximum	\$1,000 per person

Benefit Coverage	Plan Pays	Employee Pays
100% of the first \$250	\$250	\$0
Deductible \$25	\$0	\$25
80% of the next \$200	\$160	\$40
50% of the remaining \$1,180	\$590	\$590
<b>Total Cost of Care: \$1,655</b>	<b>Total: \$1,000</b>	<b>Total: \$655</b>

## Dental Coverage Restrictions & Exclusions

- Crowns/jackets/inlays/onlays/cast restorations/partial and full dentures that are replaced in less than 5 years from placement.
- Initial treatment to replace teeth lost prior to participating this dental plan.
- Cosmetic services as defined by IRS regulations.

## Orthodontic Services

Orthodontic Services are paid for dependents up to age 19 at 50% to a lifetime maximum of \$1,000, including payments made under previous Compass Family Services Dental Plans.

## Dental Health Alliance (DHA) PPO Network

While you may see any provider, this plan has access to the **Dental Health Alliance (DHA) PPO Network**. When you visit a DHA in-network provider, fees may be up to 30% less than an out-of-network provider. Visit [www.directdentalplans.com](http://www.directdentalplans.com) to find a DHA network dentist near you. Out of Network Benefits paid are based upon the 90% Usual, Customary and Reasonable Fees for the zip code of the dental office providing care.

## Information for Providers – Contact Us to Verify Patient Eligibility

Provider Services	(855) 866-2615 <a href="mailto:SDCproviderservices@skygenusa.com">SDCproviderservices@skygenusa.com</a>	Payer ID	SDCOM (Emdeon & DentalXChange)
Claim Mailing Address	Direct Dental Claims P.O. Box 497 Milwaukee, WI 53201	Claim Email	<a href="mailto:helpdesk@directdentalplans.com">helpdesk@directdentalplans.com</a>

Submit claims online at [www.directdentalplans.com](http://www.directdentalplans.com) by clicking on Login > Providers

*The services, exclusions and limitations listed above do not constitute a contract and are a summary only.  
Your complete benefit description can be found in the Summary Plan Description (SPD).*