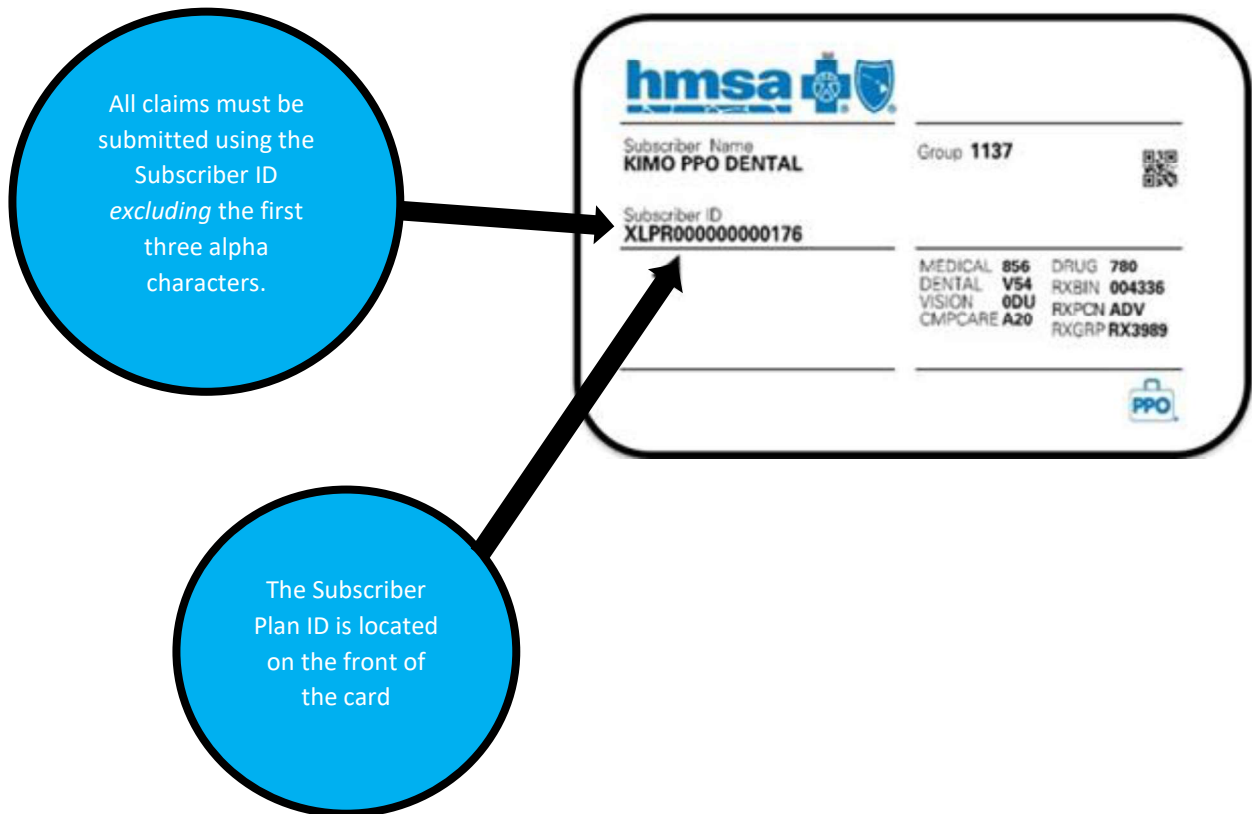


A. Preferred Provider Organization (PPO)

The PPO plan provides access to a large network of general dentists and specialists who have agreed to provide services at negotiated rates. The PPO plans also offer routine cleanings and other preventive services at little or no cost to the member, in addition to a wide range of basic and major services for which the member's out of pocket expense is limited to an annual deductible and affordable coinsurance up to the calendar year maximum. Members also have the option of using non-participating providers at a higher level of out-of-pocket cost.

To identify HMSA's members to providers, our member ID cards include alpha prefixes for Hawaii (A, XLL, XLM, R, HFP, XLA, XLC, XLE, XLH, XLP, and XLT). The prefix is positioned in front of the member's current HMSA member ID number as shown below:



NOTE: These CDT Procedure Guidelines are to be used as a reference for claim submission based on the level of benefits for each subscriber's plan. Particular details will vary from plan to plan. Verification of eligibility and individual plan benefits is required to determine the specific level of benefit coverage.