Appointments or Emergencies
Toll Free .............................................. (800) 359-6019

Appointment Center Hours
Monday - Thursday .............. 7:00 AM - 8:00 PM - PST
Friday ................................... 7:00 AM - 6:00 PM - PST
Saturday .............................. 7:00 AM - 4:00 PM - PST

Appointments
Willamette Dental strives to keep dental costs affordable for its patients. To achieve this, facilities are usually operating at their fullest capacity. Schedules fill up quickly and last-minute appointments are rare. It's very important to schedule appointments in advance. New patients are generally able to obtain their initial appointment within 30 days of their call to the Willamette Dental Appointment Center. Hygiene appointments generally have a wait-time of 45 days. Restorative treatment appointments generally have a wait-time of 60 days. These wait-times are averages. The wait-time for an appointment may vary based on your choice of provider, dental office location and your desired day or time of appointment.

Emergencies
In the event of a dental emergency, call the Willamette Dental Appointment Center at (800) 359-6019. Generally, members can be seen by a Willamette Dental dentist for a dental emergency within approximately 24 hours.

To Change An Appointment
Please call the Willamette Dental Appointment Center as soon as your plans change to reschedule your dental appointment. If you cancel with less than 24 hours notice, then you will be charged a missed-appointment fee. By giving us advance notice, we can schedule another patient at the time that you are giving up.

Patient Relations (Customer Service)
Willamette Dental has a full staff of patient relations representatives who will answer any question that you may have about your dental plan or service.

Please reach us:
Monday - Friday ....................... 8 AM to 5 PM - PST
Toll Free .............................................. (800) 360-1909
E-mail ................................. relations@willamettedental.com
Internet ......................... www.WillametteDental.com

Extensive Coverage
• Low out-of-pocket costs for most dental treatment
• No annual maximums*
• No deductibles
• No claim forms
• No benefit waiting periods
• Emergency dental care

High-Quality Care
• More than 30 years of providing quality dental care
• Clinical professionals who maintain one of the highest credentialing standards in the dental industry
• Evidence-based dental care treatment philosophy
• Most offices are open Monday through Saturday, 7 AM to 6 PM

*TMJ & orthognathic surgery has a benefit maximum. Please refer to your Certificate Of Coverage.
<table>
<thead>
<tr>
<th>Benefit</th>
<th>Co-Payment</th>
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<tbody>
<tr>
<td>Annual Maximum</td>
<td>No Annual Maximum*</td>
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<tr>
<td>Deductible</td>
<td>No Deductible</td>
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<tr>
<td>Office Visit</td>
<td>$15 per Visit</td>
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### Diagnostic & Preventive Services
- Routine & Emergency Exams: Covered at 100%
- All X-rays: Covered at 100%
- Teeth Cleaning: Covered at 100%
- Fluoride Treatment: Covered at 100%
- Sealants: Covered at 100%
- Head & Neck Cancer Screening: Covered at 100%
- Oral Hygiene Instruction: Covered at 100%
- Periodontal Charting: Covered at 100%
- Periodontal Evaluation: Covered at 100%

### Restorative Dentistry
- Fillings (Amalgam): Covered at 100%
- Porcelain-Metal Crown: $50

### Prosthetics
- Complete Upper or Lower Denture: $50
- Bridge (Per Tooth): $50

### Endodontics & Periodontics
- Root Canal Therapy
  - Anterior: Covered at 100%
  - Bicuspid: Covered at 100%
  - Molar: Covered at 100%
- Osseous Surgery (Per Quadrant): Covered at 100%
- Root Planing (Per Quadrant): Covered at 100%

### Oral Surgery
- Routine Extraction: Covered at 100%
- Surgical Extraction: Covered at 100%

### Orthodontia
- Comprehensive Orthodontia: Refer to your selected plan for applicable orthodontia co-pays**

### Miscellaneous
- Dental Lab Fees: Covered at 100%
- Local Anesthesia (Novocain): Covered at 100%
- Nitrous Oxide: Covered at 100%
- Occlusal Guard (Night Guards): Covered at 100%
- After Hours Emergency Care: $20
- Out of Area Emergency Care Is Reimbursed Up to $500 Less Co-pays

*TMJ & orthognathic surgery have a benefit maximum.
**Includes orthodontia, if available through your school district/employee group.
A Healthier Approach To Dental Care

Willamette Dental has been providing quality dental care to patients in the Pacific Northwest for more than 30 years. Each provider upholds our mission to deliver superior patient care through a partnership with our patients.

Clinically, we strive to stop the dental disease/repair cycle by implementing evidence-based methods of prevention and treatment. To do so, each of our more than 660 dental professionals have adopted today’s latest approaches to dental care that are supported by credible scientific findings.

In our practice, we use the best available scientific evidence combined with clinical experience and patient circumstances to direct treatment. Because of this evidence-based approach, our dentists have moved away from the role of repair technician and assumed a broader role of healer. Dental care providers assess risks and develop appropriate treatment plans for each patient.

A key to this philosophy is our emphasis on preserving the patients natural tooth-structure and preventing dental disease. By using proven techniques, including non-surgical methods of treatment, our practitioners can help to prevent or even reverse dental disease. As a body of dental care professionals, our practice emphasizes providing only the appropriate treatment that will lead to the optimum oral health of our patients.

Higher Standard Providers

The Willamette Dental Provider Credentialing Policy ensures that providers have the professional qualifications, licenses, endorsements, certifications and permits required by law, as well as those that meet our own schedule of standards. All providers are routinely evaluated to be sure their credentials are current, and that they are working within their appropriate scope of practice. Each clinical professional at Willamette Dental has to meet and maintain one of the highest credentialing standards in the dental industry.

So that quality of care is the same throughout our dental offices, every clinical professional is a member of the Willamette Dental Quality Assurance Program. This is how dentists, hygienists and dental assistants regularly receive updates on new products and technological advances. In this program, dentists receive regular peer reviews that monitor their treatment planning and the documentation of patient treatment. Knowing that the quality of their treatment can be reviewed by their colleagues is one of the most powerful motivators for our dentists to continuously practice our standard of quality dental care. More so, these activities promote professional development and enhance the capabilities of all Willamette Dental providers.

Evidence-Based Dentistry

We use scientifically proven methods to help you preserve your natural tooth structure.
Personal Dental Care Plan

Members of the Willamette Dental Plan are encouraged to follow the personal dental care plan that is developed with them during their first visit with their dentist. This program helps members to achieve and maintain good dental health. We have found that most patients with good home health care habits can maintain their natural tooth structure for a lifetime, ensuring healthy gums and teeth.

Caries Management Therapy

In the past, dentists believed that the only effective treatment for dental decay, also known as caries, was to remove the diseased portion of the tooth and replace it with a filling.

However, scientific studies have shown that dental decay is an infectious disease caused by a specific type of oral bacteria called mutans streptococci and that early areas of decay can be reversed. Studies also show that inappropriate or unnecessary removal of tooth structure weakens teeth, which makes them more susceptible to fracture. These findings form the basis of Willamette Dental’s modern treatment philosophy.

Willamette Dental practices Caries (cavities) Management Therapy. This involves identifying patients at risk or potential risk of tooth decay and providing appropriate therapeutic treatment. The goal is to prevent decay and conserve natural tooth structure through an extensive evaluation and treatment regimen.

As part of their Personal Dental Care Plan, every new Willamette Dental member receives a thorough risk assessment to determine susceptibility to dental decay. Decayed tooth surfaces are diagnosed and coded based upon the level of decay penetration. Willamette Dental dentists then make appropriate treatment decisions from this examination.

In most cases, advanced areas of dental decay will be restored using traditional filling materials. Early areas of decay may be reversed and re-mineralized utilizing antibacterial medications and highly concentrated fluoride solutions. This approach may require more frequent recall appointments to treat the affected areas.
Can I sign up for the Willamette Dental Plan and still go to my own dentist?

Your dental care will only be covered when it is provided by a dentist or specialist at a Willamette Dental office. Your coverage also extends if you are referred to an outside dentist or specialist by your Willamette Dental dentist. If referred to an outside dentist or specialist, your co-payments remain the same as shown in your Summary of Benefits.

Can I choose one primary care dentist to coordinate my care?

Yes, we encourage you to establish a long-term relationship with a primary Willamette Dental dentist. Once you select your dentist, you may schedule all future appointments with them. You are also free to change Willamette Dental dentists or locations at anytime.

How do I schedule an appointment?

To schedule an appointment, please call our Appointment Center:

Toll Free .................................. (800) 359-6019

Appointment Center Hours:
Monday - Thursday .......... 7 AM to 8 PM - PST
Friday .................................. 7 AM to 6 PM - PST
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How long does it generally take to get an appointment?

Willamette Dental’s scheduling goals are as follows:

First Appointment: 30 Days
Regular Hygiene (Cleanings): 45 Days
Operative: 60 Days
Emergencies: Within approximately 24 hours

With the exception of emergencies, the number of days shown above are averages. The length of wait-time for an appointment may vary based on your choice of provider, dental office location and your desired day or time of appointment.

What can I expect at my first visit?

At your first visit to our office, you will receive a thorough dental examination that includes X-rays and comprehensive risk assessments. Then, your dentist will develop a Personal Dental Care Plan based on your immediate needs, current dental health and long term oral health goals. This individual plan will include recommendations for cleanings, restorations and preventive treatments.

Do office visit charges apply each time that I have an appointment?

Yes. The office visit co-payment found in your Summary of Benefits applies to all visits, including orthodontia, if available through your school district. The office visit co-payment is in addition to other co-payments that you may incur.

Payments may be made in cash, personal check or credit card. All payments should be made at the time of service.

Will I receive two cleanings per year?

Your Willamette Dental dentist will make a recommendation for your teeth cleaning and examination frequency that fits your risk factors and oral health condition. It could involve more than two or less than two appointments per year. Your Personal Dental Care Plan will outline the frequency and duration of your treatments and examinations throughout the year.

For example, a member with periodontal disease could need four or five therapeutic cleanings in a year, whereas a member with healthy teeth and gums may only need to have a cleaning once every 12 months.
What if I have a dental emergency?
Willamette Dental provides emergency dental care during regular office hours. If you have a dental emergency, you should call the Appointment Center toll free at (800) 359-6019. If necessary, you will be able to see a dentist within approximately 24 hours. You will pay an emergency office visit co-payment for this service. After-hours, a dentist is available for dental emergency consultation over the telephone, at no cost.

How do I change an appointment?
If you need to reschedule or cancel an appointment, please call our Appointment Center at (800) 359-6019 as soon as possible. A missed appointment fee is applied to your account for any appointment that you miss without a minimum of 24 hours notice.

Can I get major work done right away?
Our practice philosophy is to first diagnose and treat urgent conditions that pose an immediate threat to your oral health. The next priority is prevention; controlling the disease process and motivating you to be active in maintaining good oral health. This assists in preventing future deterioration of oral and dental tissues due to progressive decay or periodontal disease. Major restorative work is normally performed once you have achieved a satisfactory state of oral health where your teeth and supporting structures are stabilized, and when you have demonstrated a commitment to maintaining your oral health. This is the best way to ensure the long-term success of whatever major restorative work that you may need.

Is orthodontia available in every office?
Specialty services, including orthodontia for children and adults, are generally available on a regional basis. To find out where specialty service is available in your area, simply contact our Appointment Center toll free at (800) 359-6019.

What if I have a dental emergency while I’m out of town?
In Washington, Oregon or Idaho
If you’re traveling in our service area, then call the Appointment Center at (800) 359-6019 to make an appointment at a Willamette Dental office.

Outside Our Service Area
If you cannot get to a Willamette Dental office, or if you are traveling outside our service area, then you may go to any licensed dentist to obtain emergency treatment. Emergency dental treatment is reimbursed up to the stated amount in your plan’s Summary of Benefits. Upon arriving home, contact our Patient Relations Department for reimbursement. You will need to schedule your follow-up care with your Willamette Dental primary care dentist.

Who do I call for more information?
Questions about your dental plan or service should be directed to the Willamette Dental Patient Relations Department. You can reach us:
Monday - Friday ............... 8 AM to 5 PM - PST
Phone ........................................ (800) 360-1909
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Orthodontic Benefits

For the Entire Family
You may receive orthodontic benefits if your employee group or school district has selected this option. If it is offered, an orthodontia treatment benefit is available to members when treatment is performed by a Willamette Dental orthodontist.

Orthodontia Dental Care

If your employee group or school district does not offer orthodontia coverage, then Willamette Dental plan members can receive Preferred Employee orthodontia treatment from a Willamette Dental provider at a reduced cost from our usual and customary fees.

This special price does not apply to office visit co-payments and coordination of benefits will not apply. Please see your benefits administrator for a rate schedule and complete details.

This comprehensive benefit includes full consultation, X-rays, study models, case presentation, required appliances and follow-up treatment. Throughout this treatment, our doctors perform as clinical teams to give patients total dental care oversight.

The amount of co-payment listed for Comprehensive Orthodontic Services in the Summary of Benefits, plus office visit charges, is the maximum amount that a member will pay. In some cases, the co-payment amount may be less. A major portion of the orthodontic co-payment will be paid at the initial banding appointment and the balance can then be paid in twelve monthly installments.

Prior to orthodontic treatment, members are required to meet with their primary care dentist, who will refer them to a Willamette Dental orthodontist for a pre-orthodontic consultation.

This consultation consists of three separate meetings with a Willamette Dental orthodontist. First the orthodontist performs an initial examination of the patient’s bite and answers any questions that they may have. At the next appointment, we take X-rays and photographs, as well as make models. The results of these examinations are studied and a treatment plan is developed. At the third meeting, the orthodontist presents our recommendation of the best treatment to re-align the patient’s teeth. Also, they receive a comprehensive written estimate of their treatment including its cost and a time-line of procedures.

Pre-orthodontic service co-payments are:

Initial orthodontic examination ........ $ 25
Study models and X-rays .............. $ 125
Case presentation ........................ $ 0

These non-refundable fees will be credited toward the comprehensive orthodontic co-payment if the member commences orthodontic treatment.

Transfer of Existing Orthodontic Treatment

Orthodontic treatment already in progress prior to enrolling in the Willamette Dental plan will be pro-rated according to the extent of orthodontic services provided by Willamette Dental to complete the treatment.

Please note: If the member’s coverage under the plan terminates prior to completing orthodontia treatment, then additional charges may apply. Members should refer to their Certificate of Coverage for orthodontia benefits and limitations.
Coordination of Benefits
Including Orthodontia When Offered

Willamette Dental of Washington, Inc. will administer the Coordination of Benefits (COB) according to the guidelines established by the Certificate Of Coverage. COB applies when a patient is covered by more than one dental plan that includes the COB Provision in the contract.

When this occurs, benefits from one dental plan will be coordinated with benefits from the other dental plan so that the total payment does not exceed 100% of charges. The primary insurance plan will cover expenses to its allowable coverage limits. The secondary plan will then provide benefits for the remaining allowed expenses.

An advantage of this COB to Willamette Dental members is co-payments and office visit charges are waived for legal spouses if they are enrolled as an employee and as a dependent spouse of the plan. Also, co-payments and office visit charges are waived for eligible dependent children if both legal spouses have enrolled the dependent children in the plan.

COB Guidelines

The following guidelines determine which plan provides benefits first:

1. When both dental plans coordinate benefits, the patient’s employer plan provides benefits first.

2. Birthday Rule: dependents (children) are covered first under the plan of the parent whose birthday is earlier in the calendar year.

3. If the parents are divorced, or separated, the following rules determine which plan pays first.
   a. Plan of the parent with custody, then spouse of the parent with custody.
   b. Plan of the parent without custody, then spouse of the parent without custody.

4. If there is a court decree, which established responsibility for the child’s dental care, the plan of the parent with that responsibility provides the benefits first.

5. All other plans provide benefits first if the person is a retiree, a laid-off employee or a dependent of a person who is retired or laid-off if the other plan includes this rule.

6. When the above rules do not establish the order of benefits, then the plan that has covered the patient for the longest period of time will provide benefits first.

Willamette Dental of Washington, Inc. is the benefit provider and Willamette Dental Group, P.C. is the service provider.
The Following Are Not Covered:

- Services to the extent that they are not necessary for treatment of a dental injury or disease or are not recommended and approved by the licensed dentist attending the Member or Dependent.
- Conscious sedation/general anesthesia. However, subject to the Co-pay as shown in your Summary of Benefits, general anesthesia will be covered if the Dependent is under age seven, developmentally disabled, or physically handicapped.
- Any condition resulting from military service or declared or undeclared war.
- Any injuries sustained while practicing for or competing in a professional or semiprofessional athletic contest. Semiprofessional athletics means an athletic activity for gain or pay that requires an unusually high level of skill and substantial time commitment from the participants, who are nevertheless not engaged in the activity as a full-time occupation.
- Bleaching of a tooth.
- Cast dowel posts.
- Endodontics, bridges, crowns or other service or prosthetic devices requiring multiple treatment dates or fittings if treatment was started or ordered prior to the Member’s or Dependent’s effective date under the Contract or if the item was installed or delivered more than sixty (60) days after the Member’s or Dependent’s coverage under the Contract has terminated. Root canal treatment will be covered if the tooth canal was opened prior to termination and treatment is completed within sixty (60) days after termination.
- Endodontic and prosthetic services or supplies provided before the effective date of the Member’s or Dependent’s coverage that are defective and were not provided according to the dental practice standard of care.
- Services or supplies by any person other than a licensed dentist, licensed denturist, or licensed hygienist.
- Services or supplies that would not have been made or that the Member or Dependent would have had no obligation to pay in the absence of coverage under the Contract.
- Charges incurred to comply with Occupational Safety and Health Administration (OSHA) requirements.
- Full-mouth reconstruction.
- Orthognathic surgery (except when dental necessity has been established and pre-authorized for treatment of congenital anomalies in Dependent children under age 19, and the surgery does not qualify as a medical service).
- Cosmetic dentistry or surgery.
- Habit breaking or stress-breaking appliances.
- Dental implants or implant supported prosthetics (new or replacement).
- Excision of a tumor; biopsy of soft or hard tissue; removal of a cyst or exostosis.
- Treatments, services or supplies started prior to the date the person became eligible for services as stated in the certificate of coverage.
- Extraction of permanent teeth for tooth guidance procedures; procedures for tooth movement, regardless of purpose; correction of malocclusion; preventive orthodontic procedures or other orthodontic treatment, unless specifically elected by the Participant’s employer group/district or provided in a rider attached to the Certificate of Coverage.
- Investigational services or supplies as defined in the Contract.
- Materials not approved by the American Dental Association.
- Occupational injury or disease (including any arising out of self-employment).
- Personalized restoration, precision attachments, and special techniques.
- Prescription drugs, medications, or supplies.
- Repair or replacement of lost, stolen, or broken items.
- Replacement of a lost occlusal guard shall occur once in a two-year period. An occlusal guard that is broken or damaged shall be replaced as needed.
- Replacements of an existing denture, crown, or bridge less than five (5) years after the date of the most recent placement.
- Replacement of sound restorations.
- Veneers; composite surfaces on posterior teeth.
- Services or supplies that are not listed as covered in the Certificate of Coverage.
- To the extent that coverage is available under any federal, state, or other governmental program if application is duly made, therefore, except where required by law such as cases of emergency or for coverage provided by Medicaid.
- Intentionally self-inflicted injuries. The fact that a person may be under the influence of any chemical substance shall not be considered a limitation on the ability to form the intent.
- Services for accidental injury to natural teeth that are provided more than twelve (12) months after the date of the accident.
- Hospital or other facility care for dental procedures, including physician services for hospital treatment. However, subject to the hospital co-pay as shown in your Certificate Of Coverage, services of a Licensed Dentist will be provided in a hospital or other facility only when both the following requirements are met: A) A hospital setting must be medically necessary. B) The services must be authorized, in writing, in advance by a Participating Dentist.
Willamette Dental Plan members receive their care at a Willamette Dental office. These dentists, hygienists and dental assistants are highly credentialed, and they each adhere to Willamette Dental’s evidence-based treatment philosophy.

With more than 60 offices throughout Washington, Oregon, Idaho and Nevada, there is most likely an office near your home or work.
Evidence-Based Dentistry
with a Focus on Prevention™

Dental Services Provided by:
WILLAMETTE DENTAL GROUP

Underwritten by:
WILLAMETTE DENTAL OF WASHINGTON, INC.

www.WillametteDental.com

Willamette Dental® is a trade-name in use by the Willamette Dental affiliated companies. These companies include: Willamette Dental Insurance, Inc., an Oregon Health Care Service Contractor and a Nevada Organization for dental care; Willamette Dental of Washington, Inc., a Washington Limited Health Care Service Contractor; Willamette Dental of Idaho, Inc., an Idaho Managed Care Organization; Willamette Dental Group P.C., a dental practice operating in Oregon and Idaho, and Eugene C. Skourtes, Inc., P.S., doing business as Willamette Dental Group, a dental practice operating in Washington.