# **HOWE ISD**

Dental Highlight Sheet



Dental Plan Summary POLICY #36573

Plan Benefit	
Type 1	100%
Type 2	80%
Type 3	50%
Deductible	\$5/visit Type 1
	\$50 Calendar Year Type 2,3
	No Family Maximum
Maximum (per person)	\$1,000 per calendar year
Allowance	80th U&C
Dental Rewards®	Included
Waiting Period	None
Annual Eye Exam	None
Annual Open Enrollment	Included

Orthodontia Summary - Adult and Child Coverage

Allowance	U&C
Plan Benefit	50%
Lifetime Maximum (per person)	\$1,000
Waiting Period	12 months

Sample Procedure Listing (Current Dental Terminology © American Dental Association.)

Type 1	Type 2	Type 3
Routine Exam	Space Maintainers	<ul> <li>Onlays</li> </ul>
(2 per benefit period)	Fillings for Cavities	<ul> <li>Crowns</li> </ul>
Bitewing X-rays	Restorative Composites	(1 in 8 years per tooth)
(2 per benefit period)	(anterior and posterior teeth)	Crown Repair
Full Mouth/Panoramic X-rays	<ul> <li>Endodontics (nonsurgical)</li> </ul>	Denture Repair
(1 in 5 years)	<ul> <li>Endodontics (surgical)</li> </ul>	<ul> <li>Prosthodontics (fixed bridge; removable</li> </ul>
Cleaning	<ul> <li>Periodontics (nonsurgical)</li> </ul>	complete/partial dentures)
(2 per benefit period)	<ul> <li>Periodontics (surgical)</li> </ul>	(1 in 8 years)
Fluoride for Children 13 and under	Simple Extractions	Complex Extractions
(2 per benefit period)		<ul> <li>Anesthesia</li> </ul>
Sealants (age 13 and under)		

### **Monthly Rates**

menuny nates		
Employee Only (EE)	\$34.80	
EE + Spouse	\$66.00	
EE + Children	\$83.76	
EE + Spouse & Children	\$114.52	

#### **Ameritas Information**

#### We're Here to Help

This plan was designed specifically for the associates of **HOWE ISD.** At Ameritas Group, we do more than provide coverage - we make sure there's always a friendly voice to explain your benefits, listen to your concerns, and answer your questions. Our customer relations associates will be pleased to assist you 7 a.m. to midnight (Central Time) Monday through Thursday, and 7 a.m. to 6:30 p.m. on Friday. You can speak to them by calling toll-free: 800-487-5553. For plan information any time, access our automated voice response system or go online to ameritas.com.

#### **Rx Savings**

Our valued plan members and their covered dependents can save on prescription medications at over 60,000 pharmacies across the nation including CVS, Walgreens, Rite Aid and Walmart. This Rx discount is offered at no additional cost, and it is not insurance.

To receive this Rx discount, Ameritas plan members just need to visit us at ameritas.com and sign into (or create) a secure member account where they can access and print an online-only Rx discount savings ID card.

# HOWE ISD Dental Highlight Sheet



## **Eyewear Savings**

Ameritas plan members may receive up to 10% off eyewear frames and lenses purchased at any Walmart Vision Center nationwide. Members may also bring in their current vision prescription from any vision care provider and purchase eyewear at Walmart. This savings arrangement is not insurance: it is available to members at no additional cost to their plan premium.

To receive the eyewear savings identification card, Ameritas plan members can visit ameritas.com and sign-in (or create) a secure member account. Members must present the Ameritas Eyewear Savings Card at time of purchase to receive the discount.

# **Hearing Savings**

With your Ameritas plan, you can receive hearing aid discounts through Great Hearing Benefits at their 4,500+ hearing care locations nationwide. Call 877-683-9495 for your free hearing consultation today. This savings arrangement is not insurance. It is available to members at no additional cost to their plan premium.

Highlights include hearing exam for only \$50 (saves you \$100 off the industry average of \$150), up to 50% off retail pricing on today's top hearing technology, plus a satisfaction guarantee and warranty service. Visit greathearingbenefits.com/ameritas to learn more.

#### **Dental Rewards®**

This dental plan includes a valuable feature that allows qualifying plan members to carryover part of their unused annual maximum. A member earns dental rewards by submitting at least one claim for dental expenses incurred during the benefit year, while staying at or under the threshold amount for benefits received for that year. Employees and their covered dependents may accumulate rewards up to the stated maximum carryover amount, and then use those rewards for any covered dental procedures subject to applicable coinsurance and plan provisions. If a plan member doesn't submit a dental claim during a benefit year, all accumulated rewards are lost. But he or she can begin earning rewards again the very next year.

Benefit Threshold	\$500	Dental benefits received for the year cannot exceed this amount
Annual Carryover Amount	\$250	Dental Rewards amount is added to the following year's maximum
Maximum Carryover	\$1,000	Maximum possible accumulation for Dental Rewards

# Orthodontia Waiting Period - new enrollees only

Anyone hired after the initial plan enrollment will have a 12-month waiting period, after they enroll in this dental plan, before they are eligible to receive orthodontia benefits.

## **Dental Network Information**

To find a provider, visit ameritas.com and select **FIND A PROVIDER**, then **DENTAL**. Enter your criteria to search by location or for a specific dentist or practice. California Residents: When prompted to select your network, choose the Ameritas Network found on your ID Card or contact Customer Connections at 800-487-5553.

Your provider network is Ameritas Classic Network.

# **Pretreatment**

While we don't require a pretreatment authorization form for any procedure, we recommend them for any dental work you consider expensive. As a smart consumer, it's best for you to know your share of the cost up front. Simply ask your dentist to submit the information for a pretreatment estimate to our customer relations department. We'll inform both you and your dentist of the exact amount your insurance will cover and the amount that you will be responsible for. That way, there won't be any surprises once the work has been completed.

#### **Open Enrollment**

If a member does not elect to participate when initially eligible, the member may elect to participate at the policyholder's next enrollment period. This enrollment period will be held each year and those who elect to participate in this policy at that time will have their insurance become effective on September 1. If you do not enroll during your company's open enrollment period, then you will be subject to the Late Entrant Provision.

#### Section 125

This plan is provided as part of the Policyholder's Section 125 Plan. Each employee has the option under the Section 125 Plan of participating or not participating in this plan. If an employee does not elect to participate when initially eligible, he/she may elect to participate at the Policyholder's next Annual Election Period.

#### **Language Services**

We recognize the importance of communicating with our growing number of multilingual customers. That is why we offer a language assistance program that gives you access to: Spanish-speaking claims contact center representatives, telephone interpretation services in a wide range of languages, online dental network provider search in Spanish and a variety of Spanish documents such as enrollment forms, claim forms and certificates of insurance.

This document is a highlight of plan benefits provided by Ameritas Life Insurance Corp. as selected by your employer. It is not a certificate of insurance and does not include exclusions and limitations. For exclusions and limitations, or a complete list of covered procedures, contact your benefits administrator.