# **BELLVILLE INDEPENDENT SCHOOL DISTRICT**

Dental Highlight Sheet



Effective Date: 9/1/2024

010-400256 Dental Plan Summary

Plan Benefit	
Type 1	100%
Type 2	80%
Type 3	50%
Deductible	\$20/visit
	Type 1,2,3
	No Family Maximum
Maximum (per person)	\$1,000 per calendar year
Allowance	U&C
Dental Rewards®	Included
Waiting Period	12 months

Orthodontia Summary - Child Only Coverage

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Allowance	U&C
Plan Benefit	50%
Lifetime Maximum (per person)	\$1,000
Ameritas Rewards <sup>SM</sup> Lifetime (per person)	\$100
	New Treatment Plan and Services Only
Waiting Period	12 months New Enrollees Only

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

	Type 1		Type 2		Type 3
•	Routine Exam	•	Space Maintainers	•	Onlays
	(1 in 6 months)	•	Restorative Amalgams	•	Crowns
•	Bitewing X-rays	•	Restorative Composites		(1 in 10 years per tooth)
	(1 in 12 months)		(anterior and posterior teeth)	•	Crown Repair
•	Full Mouth/Panoramic X-rays	•	Denture Repair	•	Endodontics (nonsurgical)
	(1 in 5 years)	•	Simple Extractions	•	Endodontics (surgical)
•	Periapical X-rays			•	Periodontics (nonsurgical)
•	Cleaning			•	Periodontics (surgical)
	(1 in 6 months)			•	Implants
•	Fluoride for Children 13 and under			•	Prosthodontics (fixed bridge; removable
	(1 in 12 months)				complete/partial dentures)
•	Sealants (age 13 and under)				(1 in 10 years)
				•	Complex Extractions
				•	Anesthesia

# **Monthly Rates**

Employee Only (EE)	\$28.68
EE + Spouse	\$66.60
EE + Children	\$89.08
EE + Spouse & Children	\$118.28

### **Ameritas Information**

**We're Here to Help:** 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, visit ameritas.com and sign into (or create) a secure member account to access and print an online-only Rx discount savings ID card.

# Type 3 Waiting Period - new enrollees only.

The group of initial employees who enroll in this plan have no waiting period for Type 3 benefits. 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 Type 3 benefits.

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## **Eyewear Savings**

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.

# Ameritas Rewards<sup>SM</sup>

Employees and their covered dependents may accumulate dental rewards with an unlimited maximum carryover amount. These rewards can be used to increase the maximum for the other lines of coverage which can then be used for certain covered services or materials subject to applicable deductible, coinsurance and plan provisions.

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

#### Orthodontia Waiting Period - new enrollees only.

The group of initial employees who enroll in this plan have no waiting period for orthodontia benefits. 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.

#### **Pretreatment**

It's to know your share of the cost up front. 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.

#### **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.

#### **Late Entrant Provision**

We strongly encourage you to sign up for coverage when you are initially eligible. If you choose not to sign up during this initial enrollment period, you will become a late entrant. Late entrants will be eligible for only exams, cleanings, and fluoride applications for the first 12 months they are covered.

# 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.

#### **Dental Cost Estimator**

Members can search by ZIP Code for a specific dental procedure and see fee range estimates for out-of-network general dentists in that area. we suggest that members partner with their dentists to know what's involved in any recommended treatment plan. Cost estimates do not reflect discounted rates available through provider networks, and the estimator does not include orthodontic estimates.

### **Worldwide Support**

Ameritas offers its dental and vision plan members 24-hour access to dental or vision provider referrals when traveling outside the U.S. Immediately after a call is made to AXA, an assistance coordinator assesses the situation, provides credible provider referrals and can even assist with making the appointment. Within 48 hours following the appointment, the coordinator calls the member to find out if additional assistance is needed. If all is well, the case is closed. Contact AXA Assistance USA toll free by calling 866-662-2731, or call collect from anywhere in the world by dialing 1-312-935-3727.

# **Language Services**

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.

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.