

# Dental Plan



## Dental Plan Benefits

	In-Network	Out-of-Network
Type 1 Preventive No Waiting Period	100%	80%
	<ul style="list-style-type: none"> <li>Routine Exam (2 per Benefit Period)</li> <li>Bitewing X-rays (1 per Benefit Period)</li> <li>Cleaning (2 per Benefit Period)</li> </ul>	<ul style="list-style-type: none"> <li>Routine Exam (2 per Benefit Period)</li> <li>Bitewing X-rays (1 per Benefit Period)</li> <li>Cleaning (2 per Benefit Period)</li> </ul>
Type 2 Basic No Waiting Period	80%	50%
	<ul style="list-style-type: none"> <li>Surgical Extractions</li> <li>Restorative Amalgams</li> <li>Restorative Composites</li> <li>Endodontics (nonsurgical)</li> <li>Periodontics (nonsurgical)</li> <li>Endodontics (surgical)</li> <li>Periodontics (surgical)</li> <li>Simple Extractions</li> </ul>	<ul style="list-style-type: none"> <li>Surgical Extractions</li> <li>Restorative Amalgams</li> <li>Restorative Composites</li> <li>Endodontics (nonsurgical)</li> <li>Periodontics (nonsurgical)</li> <li>Endodontics (surgical)</li> <li>Periodontics (surgical)</li> <li>Simple Extractions</li> </ul>
Type 3 Major No Waiting Period	50%	40%
	<ul style="list-style-type: none"> <li>Crowns (1 in 5 years per tooth)</li> <li>Prosthodontics (Bridges, Dentures) (1 in 5 years)</li> <li>Implants</li> </ul>	<ul style="list-style-type: none"> <li>Crowns (1 in 5 years per tooth)</li> <li>Prosthodontics (Bridges, Dentures) (1 in 5 years)</li> <li>Implants</li> </ul>

## Deductible

	In-Network	Out-of-Network
Type 1	\$0	\$0
Type 2 and 3	\$50 per person, per calendar year	\$100 per person, per calendar year
Family Maximum	\$150 per Benefit Period	\$300 per Benefit Period

## Plan Year Maximum

	In-Network	Out-of-Network
Type 1, 2, and 3 (per person, per benefit period)	\$2,000	\$1,500

## Orthodontia Benefits (children under age 17)

No waiting period		
Plan Benefit	50%	50%
Lifetime Deductible	\$0	\$0
Lifetime Maximum (per person)	\$2,500	\$2,500

## Claims Allowance

Type 1, 2 and 3	Discounted Fee	80th U&C
-----------------	----------------	----------

To find an in-network provider for dental services, log onto the website at [www.Ameritas.com](http://www.Ameritas.com) and choose the PPO network or call customer service at 1-800-659-2223. Dependents are eligible until their 26<sup>th</sup> birthday.