

PENSACOLA STATE COLLEGE – Low Plan

Policy #: 010-42479



Dental Plan Benefits

	In-Network	Out-of-Network
Type 1 Preventive No Waiting Period	100%	100%
	<ul style="list-style-type: none"> Routine Exam (1 per 6 months) Bitewing X-rays (1 per 12 months) Cleaning (1 per 6 months) 	<ul style="list-style-type: none"> Routine Exam (1 per 6 months) Bitewing X-rays (1 per 12 months) Cleaning (1 per 6 months)
Type 2 Basic No Waiting Period	80%	50%
	<ul style="list-style-type: none"> Restorative Amalgams Restorative Composites Endodontics (nonsurgical) Periodontics (nonsurgical) Endodontics (surgical) Periodontics (surgical) Simple Extractions 	<ul style="list-style-type: none"> Restorative Amalgams Restorative Composites Endodontics (nonsurgical) Periodontics (nonsurgical) Endodontics (surgical) Periodontics (surgical) Simple Extractions
Type 3 Major No Waiting Period	50%	25%
	<ul style="list-style-type: none"> Surgical Extractions Crowns (1 in 5 years per tooth) Prosthodontics (Bridges, Dentures) (1 in 5 years) 	<ul style="list-style-type: none"> Surgical Extractions Crowns (1 in 5 years per tooth) Prosthodontics (Bridges, Dentures) (1 in 5 years)

Deductible

Type 1	\$0	\$0
Type 2 and 3	\$50 per person, per calendar year	\$50 per person, per calendar year
Family Maximum	\$150 per Calendar Year	\$150 per Calendar Year

Benefit Year Maximum

Type 1, 2, and 3 (per person, per calendar year)	\$1,250	\$1,000
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Claims Allowance

Type 1, 2 and 3	Discounted Fee	Maximum Allowable Benefit
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Rates - 26 Payroll Deductions

Employee only	\$12.92
Employee & Spouse	\$26.10
Employee & Child(ren)	\$30.24
Employee & Spouse & Child(ren)	\$43.40

Rates - 19 Payroll Deductions

Employee only	\$17.68
Employee & Spouse	\$35.72
Employee & Child(ren)	\$41.38
Employee & Spouse & Child(ren)	\$59.39

Open Enrollment

If you do not elect to participate when initially eligible, you may elect to participate at the policyholder's next enrollment period, which normally coincides with the policy anniversary date.

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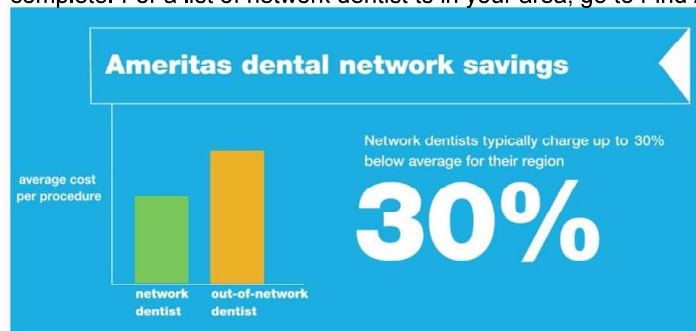
Dental Rewards

Your dental plan includes Dental Rewards as a way to grow your annual maximum benefit. Simply by visiting a dental provider each year and submitting a claim, you can increase your annual maximum benefit over time. After your initial benefit is used, accumulated rewards are there to help pay for more expensive procedures, such as root canals or crowns.

Here's how it works. For each year, you submit at least one dental claim and your total dental benefits paid for the year are at or under \$500 you qualify to carry over \$250 in rewards to the following year. When your dental visit is to an Ameritas network provider, you earn an extra \$100 PPO Bonus. You may accumulate rewards up to the maximum amount of \$1000. Please note, if you do not submit a dental claim during the year, no rewards are earned and accumulated rewards are reset to zero. However, you can start qualifying for rewards again the very next year.

Provider Flexibility and Network Savings

Members aren't limited to one particular dentist, or a small group of providers, who may or may not be taking new patients. Each plan member is free to visit any provider they choose, including your current dentist, regardless if they are in- or out-of-network. And family members do not have to see the same dentist. When you visit an in-network dentist there are no claim forms to complete. For a list of network dentists in your area, go to Find A Provider at ameritas.com.



The Ameritas dental network is one of the **5 largest networks** in the nation for access points. Source: NetMinder 2016

Ameritas Network: These plans give you more than 428,000 access points across the nation for dental care.

Late Entrant

We strongly encourage you and/or your dependents to sign up for coverage when you are initially eligible. If you choose to enroll after initially declining, you and/or your eligible dependents will be considered a Late Entrant. Covered expenses will not include and benefits will not be payable in the first 12 months that a person is insured if the person is a Late Entrant; except for evaluations, prophylaxis (cleanings), and fluoride application. After 12 months, you will have access to all of the plan's benefits.

Member Savings

Prescriptions



Save an average of 40% on generic and brand name prescriptions at over 60,000 pharmacies including CVS, Walgreens, Rite Aid and Walmart. Use your normal health care pharmacy benefit, or the prescription discount, whichever saves you more. This Rx discount is offered at no additional cost, and it is not insurance.

Access your Ameritas Rx savings card:

<https://www.ameritas.com/OCM/GetFile?doc=037275>

Frames and lenses

Save up to 15% at any Walmart Vision Center:

-  • top quality frames for the entire family including today's most popular brands
-  • wide selection of lens options; all lenses come with scratch resistant coating for no additional charge
-  • safety eyewear

This discount is available to you without any additional cost to your plan premium.

Customer Service

Customer Connections 800-487-5553 www.Ameritas.com
Monday - Thursday 7am-12am CST, Friday 7am-6:30pm CST

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.

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