

NEBRASKA NEW CAR AND TRUCK

Dental Highlight Sheet



Dental Plan Option 2

	In Network	Out of Network
Coinsurance		
Type 1	100%	80%
Type 2	80%	60%
Type 3	50%	40%
Deductible	\$50/Calendar Year Type 2 & 3 Waived Type 1 3 Family Maximum	\$50/Calendar Year Type 2 & 3 Waived Type 1 3 Family Maximum
Maximum (per person)	\$1,000 per calendar year	\$1,000 per calendar year
Allowance	Contracted Fee	90th U&C
Waiting Period	6 Months for Major	6 Months for Major
Annual Eye Exam	None	None
LASIK Advantage®	None	None

Orthodontia Summary - Adult and Child Coverage

	In Network	Out of Network
Allowance	Discounted Fee	U&C
Coinsurance	50%	50%
Lifetime Maximum (per person)	\$1,000	\$1,000
Waiting Period	12 months	12 months

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

Type 1	In Network Type 2	Type 3
<ul style="list-style-type: none"> • Routine Exam (2 per benefit period) • Bitewing X-rays (2 per benefit period) • Cleaning (2 per benefit period) • Fluoride for Children 18 and under (1 per benefit period) • Sealants (age 16 and under) • Space Maintainers 	<ul style="list-style-type: none"> • Full Mouth/Panoramic X-rays (1 in 3 years) • Periapical X-rays • Restorative Amalgams • Restorative Composites • Denture Repair • Simple Extractions • Anesthesia 	<ul style="list-style-type: none"> • Onlays • Crowns (1 in 5 years per tooth) • Crown Repair • Endodontics (nonsurgical) • Endodontics (surgical) • Periodontics (nonsurgical) • Periodontics (surgical) • Prosthodontics (fixed bridge; removable complete/partial dentures) (1 in 5 years) • Complex Extractions
Type 1	Out of Network Type 2	Type 3
<ul style="list-style-type: none"> • Routine Exam (2 per benefit period) • Bitewing X-rays (2 per benefit period) • Cleaning (2 per benefit period) • Fluoride for Children 18 and under (1 per benefit period) • Sealants (age 16 and under) • Space Maintainers 	<ul style="list-style-type: none"> • Full Mouth/Panoramic X-rays (1 in 3 years) • Periapical X-rays • Restorative Amalgams • Restorative Composites • Denture Repair • Simple Extractions • Anesthesia 	<ul style="list-style-type: none"> • Onlays • Crowns (1 in 5 years per tooth) • Crown Repair • Endodontics (nonsurgical) • Endodontics (surgical) • Periodontics (nonsurgical) • Periodontics (surgical) • Prosthodontics (fixed bridge; removable complete/partial dentures) (1 in 5 years) • Complex Extractions

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Ameritas Information

We're Here to Help

This plan was designed specifically for the associates of **NEBRASKA NEW CAR AND TRUCK**. 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 ameritasgroup.com/member.

Orthodontia Waiting Period

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.

PPO Information

To find a provider, visit ameritasgroup.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 **PPO Dental 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.

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.

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.