

WILLIAMSON COUNTY
Dental Highlight Sheet



LOW PLAN - DENTAL HIGHLIGHTS

Policy # 301175

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|-----------------------------|---------------------------|
| Coinsurance | |
| Type 1 | 100% |
| Type 2 | 90% |
| Deductible | \$50/Calendar Year Type 2 |
| | Waived Type 1 |
| | \$150/family |
| Maximum (per person) | \$750 per calendar year |
| Allowance | 90th U&C |
| Waiting Period | None |

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

| Type 1 | Type 2 |
|---|---|
| <ul style="list-style-type: none"> • Routine Exam (2 per benefit period) • Bitewing X-rays (2 per benefit period) • Full Mouth/Panoramic X-rays (1 in 3 years) • Periapical X-rays • Cleaning (2 per benefit period) • Fluoride for Children 18 and under (1 per benefit period) • Sealants (age 16 and under) | <ul style="list-style-type: none"> • Restorative Amalgams • Restorative Composites • Endodontics (nonsurgical) • Endodontics (surgical) • Periodontics (nonsurgical) • Periodontics (surgical) • Denture Repair • Simple Extractions • Complex Extractions • Anesthesia |

Ameritas Information

We're Here to Help

This plan was designed specifically for the associates of **WILLIAMSON COUNTY**. 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.

Choose Any Dentist Or a Network Provider and Save

With Ameritas, see any dentist of your choice or choose a PPO network provider and save. PPO providers have discounted their fees resulting in lower out-of-pocket costs. To access PPO locations visit our website www.ameritasgroup.com - click on "Find a Provider" on the top of the screen for step-by-step instructions or call toll free, 800-487-5553 to speak with a customer service representative.

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.

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.