Cook & Boardman Group

Dental Highlight Sheet

Ameritas

Effective Date: 1/1/2025

Plan Benefit	
Type 1	100%
Type 2	90%
Type 3	50%
Deductible	$50/Calendar Year Type 2 & 3 Waived Type 1 $100/family
Maximum *(per person)*	$1,500 per calendar year
Preventive Plus[SM]	Included
Allowance	90th U&C
Waiting Period	None
Annual Open Enrollment	Included

Orthodontia Summary - Adult and Child Coverage

Allowance	U&C
Plan Benefit	50%
Lifetime Maximum *(per person)*	$1,500
Waiting Period	None

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

Type 1	Type 2	Type 3
• Routine Exam (2 per benefit period)	• Space Maintainers	• Onlays
• Bitewing X-rays (2 per benefit period)	• Fillings for Cavities	• Crowns (1 in 5 years per tooth)
• Full Mouth/Panoramic X-rays (1 in 5 years)	• Restorative Composites	• Crown Repair
• Periapical X-rays	• Endodontics (nonsurgical)	• Denture Repair
• Cleaning (2 per benefit period)	• Endodontics (surgical)	• Implants
• Fluoride for Children 18 and under (2 per benefit period)	• Periodontics (surgical)	• Prosthodontics (fixed bridge; removable complete/partial dentures) (1 in 5 years)
• Sealants (age 16 and under)	• Periodontics (nonsurgical)	
	• Simple Extractions	
	• Complex Extractions	
	• Anesthesia	

Ameritas Information

Customer Service (7 a.m. to midnight (Central Time) Monday through Thursday, and 7 a.m. to 6:30 p.m. on Friday. **800-487-5553**

Ameritas website: www.ameritas.com

Claim Address: Ameritas Group Claims/PO Box 82520 / Lincoln, NE 68501-2520

Preventive Plus[SM]

With this plan option, benefits for Type 1/Preventive procedures are not deducted from the plan member's annual maximum benefit. This saves the entire annual maximum for the Type 2/Basic and Type 3/Major procedures that are covered by your plan.

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.

Your provider network is Ameritas Classic and Plus 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.

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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 January 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.