

# New Hanover County Schools

## Dental Highlight Sheet

### Effective Date: 8/1/2018

Currently enrolled members can choose between the Standard PPO Plan and the In Network Only Plan shown below.

Eligible dependents can also be covered and will receive the same plan chosen by the employee.

Members cannot change their election until the next election period at which time the member can switch between plans without penalty.

Note: If you are not currently covered, elect coverage now, and do not have a qualifying event, you will become a late entrant \*\*.

Plan Benefit	Standard PPO Plan	In Network Only Plan
Type 1	100%	100%
Type 2	80%	80%
Type 3	50%	50%
Deductible	\$100/Calendar Year Type 2 & 3 Waived Type 1	\$50/Calendar Year Type 2 & 3 Waived Type 1
Maximum (per person)	No Family Maximum \$850 per calendar year	No Family Maximum \$1,350 per calendar year
Allowance	90th U&C	Discounted Fee
Dental Rewards®	Included	Included
Waiting Period	None	None
Annual Open Enrollment	None	None

### Orthodontia Summary - Child Only Coverage

Allowance	U&C	U&C
Plan Benefit	50%	50%
Lifetime Maximum (per person)	\$1,000	\$1,000
Waiting Period	None	None

### Sample Procedure Listing - Applies to both plans shown above. (Current Dental Terminology © American Dental Association.)

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

### Dental Rewards® - Applies to both plans shown above.

This dental plan includes a valuable feature that allows qualifying plan members to carryover part of their unused annual maximum. A member earns dental rewards by submitting at least one claim for dental expenses incurred during the benefit year, while staying at or under the threshold amount for benefits received for that year. In addition, a person earning dental rewards who submits a claim for services received through the dental network earns an extra reward, called the PPO Bonus. Employees and their covered dependents may accumulate rewards up to the stated maximum carryover amount, and then use those rewards for any covered dental procedures subject to applicable coinsurance and plan provisions. If a plan member doesn't submit a dental claim during a benefit year, all accumulated rewards are lost. But he or she can begin earning rewards again the very next year.

Benefit Threshold	\$500	Dental benefits received for the year cannot exceed this amount
Annual Carryover Amount	\$250	Dental Rewards amount is added to the following year's maximum
Maximum Carryover	\$1000	Maximum possible accumulation for Dental Rewards and PPO Bonus combined

Groups with a program similar to Dental Rewards on their previous plan are eligible for Dental Rewards Credits. To qualify for Dental Rewards Credits, the employer must request a list of carryover amounts from the previous carrier, to be sent to Ameritas.

Ameritas will credit each account based on amounts identified by the previous carrier. The credit is available only to initial insureds. The credit, and any amounts earned under our plan, will not exceed the maximum carryover proposed for the plan selected.

Enrollment data must include information for all dependents enrolling in the plan.

### Monthly Rates

#### For either plan shown above

	12 Pay	10 Pay	20 Pay
Employee Only (EE)	\$32.86	\$39.43	\$19.72
EE + Spouse	\$62.58	\$75.10	\$37.55
EE + Children	\$80.21	\$96.25	\$48.13
EE + Spouse & Children	\$110.03	\$132.04	\$66.02

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## Dental Highlight Sheet

### Ameritas Information

**We're Here to Help!** This plan was designed specifically for the associates of New Hanover County Schools. 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 **ameritas.com**.

### \*\* Late Entrant Provision

We strongly encourage you to sign up for coverage when you are initially eligible.

During this election period, if you are currently enrolled, you can choose between the **Standard PPO Plan** and the **In Network Only Plan** shown in this benefit highlight.

If you were not covered under the prior plan, now elect coverage, and do not have a qualifying event, 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.**

### 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.

### 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.

### Rx Savings

Our valued plan members and their covered dependents can save on prescription medications at over 60,000 pharmacies across the nation including CVS, Walgreens, Rite Aid and Walmart. This Rx discount is offered at no additional cost, and it is not insurance.

To receive this Rx discount, Ameritas plan members just need to visit us at **ameritas.com** and sign into (or create) a secure member account where they can access and print an online-only Rx discount savings ID card.

### Eyewear Savings

Ameritas plan members may receive up to 15% off eyewear frames and lenses purchased at any Walmart Vision Center nationwide. Members may also bring in their current vision prescription from any vision care provider and purchase eyewear at Walmart. This savings arrangement is not insurance: it is available to members at no additional cost to their plan premium.

To receive the eyewear savings identification card, Ameritas plan members can visit **ameritas.com** and sign-in (or create) a secure member account. Members must present the Ameritas Eyewear Savings Card at time of purchase to receive the discount.

### Worldwide Support

When our members travel abroad, they'll have peace of mind knowing that should a dental or vision need arise, help is just a phone call away. Through AXA Assistance, Ameritas offers its dental and vision plan members 24-hour access to dental or vision provider referrals when traveling outside the U.S.

Immediately after a call is made to AXA, an assistance coordinator assesses the situation, provides credible provider referrals and can even assist with making the appointment. Within 48 hours following the appointment, the coordinator calls the member to find out if additional assistance is needed. If all is well, the case is closed. Then, the plan member may submit a claim to Ameritas for reimbursement consideration based on applicable plan benefits. Contact AXA Assistance USA toll free by calling 866-662-2731, or call collect from anywhere in the world by dialing 1-312-935-3727.

### Language Services

We recognize the importance of communicating with our growing number of multilingual customers. That is why we offer a language assistance program that gives you access to: Spanish-speaking claims contact center representatives, telephone interpretation services in a wide range of languages, online dental network provider search in Spanish and a variety of Spanish documents such as enrollment forms, claim forms and certificates of insurance.

**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.**

# online account access for members



Sign up for easier and faster digital access to your benefits information with online Explanation of Benefits (EOB).



Create your free secure member account, and you'll have instant access to ID cards, plan benefits, your certificate of coverage, claims information and remaining benefits.

## Enroll Now! Here's How.

- Go to [ameritas.com](http://ameritas.com) to create a secure member account.
- Select the "Account Access" link in the upper right corner of the home page to see the "account access" page where you'll select the Dental/Vision/Hearing drop down.
- Choose "Secure Member Account."
- On the Login page select the "Register Now" link.
- Complete the New User Registration form.



Select **Electronic Explanation of Benefits (eEOB)**, and we'll email you whenever a claim is processed, instead of mailing you a paper statement.

To switch to eEOB and stop paper claims, select this preference on the My Profile page after you log in to your secure member account.

You can also use your online member account to access forms, read frequently asked questions or nominate your dentist to be part of our network.



The online EOB lets you know about the claims processed for everyone on your plan. It is not a bill. It's a summary of recent care charges and benefit plan payments. The easy-to-read format includes what claims were submitted, what has been paid and how your plan discounts are impacting your benefits.

**HOW YOUR CLAIM WAS CALCULATED**  
[Return to Action Taken](#)  
**explanation of dental benefits**

**Total Amount You Owe Provider** (unless previously paid) **\$ 102.00** [Printer Friendly](#)  
 Your provider will bill you directly.

Ameritas Life Insurance Corp  
 P. O. Box 82520  
 Lincoln, NE 68501-2520  
 1-800-487-5553

Date of Service:  
 Member Name:  
 Patient Name:  
 Patient Relationship:  
 Patient DOB:  
 Claim Number:  
 Provider Name:  
 Plan Sponsor:  
 Plan Number:

**How Your Claim Was Calculated**

Date of Service	Service Type	Tooth/ Arch/ Quad	Submitted Procedure Code	Paid Procedure Code	Description	Charge Submitted By Provider	Provider Adjustment	Network Provider Fee	Amount Covered By Plan	Deductible Applied	Amount Covered After Deductible	% Plan Pays	Amount Payable By Plan
12/09/14	TYPE 2	08	D2330	D2330	RESTORATION	\$134.00	-\$24.00	\$110.00	\$110.00	-\$0.00	\$110.00	x 100%	\$110.00
12/09/14	TYPE 2	09	D2330	D2330	RESTORATION	\$134.00	-\$24.00	\$110.00	\$110.00	-\$0.00	\$110.00	x 100%	\$110.00
12/09/14	TYPE 2	18	D2392	D2150	RESTORATION	\$180.00	-\$22.00	\$158.00	\$107.00	-\$0.00	\$107.00	x 100%	\$107.00
REMARK 62 - BENEFITS PROVIDED ARE BASED ON ALLOWANCE FOR AN AMALGAM RESTORATION (SILVER FILLING). THIS PLAN PROVIDES COVERAGE FOR COMPOSITE RESTORATIONS (TOOTH COLORED FILLINGS) ONLY WHEN PERFORMED ON NON-MOLAR TEETH. BENEFITS PROVIDED BY THIS PLAN ARE NOT INTENDED TO DETERMINE TREATMENT. REFER TO "TABLE OF PROCEDURES"/"DENTAL PROVISIONS"/"SCHEDULE" IN YOUR POLICY OR CERTIFICATE BOOKLET.													
12/09/14	TYPE 2	19	D2392	D2150	RESTORATION	\$180.00	-\$22.00	\$158.00	\$107.00	-\$0.00	\$107.00	x 100%	\$107.00
See Remark 62 above.													
<b>Claim Totals</b>						<b>\$626.00</b>	<b>-\$92.00</b>	<b>\$536.00</b>					<b>\$434.00</b>

**Compared to paper statements, online statements are:**

- **more secure.** A primary method of identity theft is stealing documents that are sent through the physical mail; receiving EOBs electronically is one way to reduce the risk.
- **more detailed.** Eliminate clutter and still receive more details on your claims than you would from a paper statement.

- **convenient.** You can access the secure member portal 24/7.
- **faster.** You don't have to wait for mail delivery.
- **better for the environment.** Online EOBs save trees and reduce carbon emissions.



This information is provided by Ameritas Life Insurance Corp. (Ameritas Life). Group dental, vision and hearing care products (9000 Rev. 03-08, dates may vary by state) and individual dental and vision products (Indiv. 9000 Ed. 11-09) are issued by Ameritas Life. Some plan designs are not available in all areas. In Texas, our dental network and plans are referred to as the Ameritas Dental Network. Some states require that producers be appointed with Ameritas Life before soliciting its products. To become appointed with Ameritas Life, please call 800-659-2223. Most plans for groups with 26 or more enrolled lives are administered by Ameritas Life. Billing and eligibility for most plans with 25 or fewer enrolled lives are provided by HealthPlan Services, Inc.

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