# **NBA BENEFIT PLANS**

# Dental Highlight Sheet - AB High Plan

Effective date: January 1, 2023

#### Plan Benefit

Type 1	100%
Type 2	90%
Type 3	60%
Deductible	\$50/Calendar Year Type 2 and Type 3
	Waived Type 1
	\$150/family
Maximum (per person)	\$1,750 per calendar year
Allowance	90 <sup>th</sup> U&C
Dental Records®	Included
Waiting Period	None
Annual Eye Exam	None
Annual Open Enrollment	Included

## Orthodontia Summary - Adult and Child Coverage

Allowance	U&C
Plan Benefit	50%
Lifetime Maximum (per	\$1,000
person)	ψ1,000
Waiting Period	None

# Sample Procedure Listing (Current dental terminology © American Dental Association

Type 1	Type 2	Type 3
• Routine exam (2 per benefit period)	Restorative amalgams	• Onlays
Bitewing X-rays (2 per benefit	Restorative composites	• Crowns (1 in 5 years per
period)	(anterior and posterior teeth)	tooth)
• Full mouth/panoramic X-rays (1 in 5	• Endodontics (nonsurgical)	• Crown repair
years)	• Endodontics (surgical)	• Implants
• Periapical X-rays	• Periodontics (nonsurgical)	<ul> <li>Prosthodontics (fixed</li> </ul>
• Cleaning (4 per benefit period)	Periodontics (surgical)	bridge, removable
• Fluoride for children age 18 and	Denture repair	complete/partial
under (1 per benefit period)	Simple extractions	dentures) (1 in 10 years)
• Sealants (age 15 and under)	Complex extractions	
Space maintainers	Anesthesia	

#### **Ameritas Information**

We're here to help – This plan was designed specifically for the associates of the Nebraska Bankers Association Benefit Plans. 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-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.





#### **Dental Rewards®**

This dental plan includes a valuable feature that allows plan members to carry over part of their unused annual maximum. A member must submit at least one claim during the benefit year while staying at or under the plan-specific threshold amount. Earn an extra reward, called the PPO Bonus, by seeing a network provider. Employees and their covered dependents may accumulate rewards up to the stated maximum carryover amount, 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 the benefit year, all accumulated rewards will be lost; however, he or she can begin earning rewards again the very next year.

Benefit Threshold	\$750	Dental benefits received for the year cannot exceed this amount
Annual Carryover Amount	\$400	Dental Rewards amount is added to the following year's maximum
Annual PPO Bonus	\$200	Additional bonus is earned if the member sees a network provider
Maximum Carryover	\$1,200	Maximum possible accumulation for Dental Rewards and PPO Bonus combined

#### **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. 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 you will be responsible for. That way, there won't be any surprises once the work has been completed.

### **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.

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.