

	PASSIVE PPO 100%/80%/0%-\$750	PASSIVE PPO 100%/50%/50%-\$750	ACTIVE PPO 100%/80%/50%-\$1,000	PASSIVE PPO 100%/80%/50%-\$1,000	PASSIVE PPO 100%/80%/50%-\$1,500 with Ortho*
Coinsurance					
Type 1—Preventive Services	100%	100%	In-network: 100% Out-of-network: 80%	100%	100%
Type 2—Basic Services	80%	50%	In-network: 80% Out-of-network: 60%	80%	80%
Type 3—Major Services	0%	50%	In-network: 50% Out-of-network: 50%	50%	50%
Annual Deductible (calendar year)	\$50 Type 2 Waived Type 1 Family max \$150	\$50 Type 2 & 3 Waived Type 1 Family max \$150	\$50 Type 2 & 3 Waived Type 1 Family max \$150	\$50 Type 2 & 3 Waived Type 1 Family max \$150	\$50 Type 2 & 3 Waived Type 1 Family max \$150
Calendar Year Maximum (per person)	\$750	\$750	\$1,000	\$1,000	\$1,500
Out-of-Network Allowance U&C = Usual & Customary	90th U&C	90th U&C	In-network: Contracted fee Out-of-network: 90th U&C	90th U&C	90th U&C
Routine Exam (1 in 6 mos.)	100%	100%	In-network: 100% Out-of-network: 80%	100%	100%
Cleaning (1 in 6 mos.)	100%	100%	In-network: 100% Out-of-network: 80%	100%	100%
X-rays (according to schedule)	100%	100%	In-network: 100% Out-of-network: 80%	100%	100%
Endodontics	Not covered	50%	In-network: 50% Out-of-network: 50%	80%	80%
Periodontics	Not covered	50%	In-network: 50% Out-of-network: 50%	80%	80%
Anesthesia	Not covered	50%	In-network: 50% Out-of-network: 50%	50%	80%
Orthodontia*	Not covered	Not covered	Not covered	Not covered	Covered 50% to \$1,000 lifetime max., subject to U&C. No waiting period.
Ameritas Dental Rewards®	Not included	Not included	Not included	Included. See description on CBIA's website (cbia.com)	Included. See description on CBIA's website (cbia.com)
Monthly Rates					
Employee	\$33.96	\$36.88	\$40.64	\$49.64	\$58.44
Employee & Spouse	\$64.08	\$70.16	\$77.44	\$94.68	\$111.20
Employee & Children	\$88.00	\$86.12	\$92.96	\$116.00	\$141.24
Family	\$118.12	\$119.48	\$129.80	\$161.04	\$194.00

This document is a benefit highlight. It is not a certificate of insurance. See the carrier policy/certificate for a detailed description of benefits and terms, including a complete list of covered procedures and exclusions and limitations. Underwritten by Ameritas Life Insurance Corp. Ameritas, the bison symbol and "fulfilling life" are service marks or registered service marks of Ameritas Mutual Holding Company and are used with permission. Call the number on your ID card if you have questions about your benefits.

*Orthodontic coverage is available for dependent children only. Covered Expenses will not include and benefits will not be payable for expenses incurred on or after the Insured's 19th birthday.

CBIA Service Corp.