



Ameritas

Passive PPO 100%/80%/50%– \$1,500 with Ortho*

Voluntary Dental

For effective dates May
2024 and beyond

Coinsurance

Type 1—Preventive Services	100%
Type 2—Basic Services	80%
Type 3—Major Services	50%
Annual Deductible (calendar year)	\$50 Type 2 & 3, Waived Type 1, Family max. \$150
Calendar Year Maximum (per person)	\$1,500
Out-of-Network Allowance U&C = Usual & Customary	90th U&C
Routine Exam and Cleaning (1 in 6 mos.)	100%
X-rays (according to schedule)	100%
Endodontics	80%
Periodontics	80%
Anesthesia	80%
Orthodontia *	Covered 50% of U&C to \$1,000 max. (lifetime max. per person). No waiting period.
Ameritas Dental Rewards®	Included. See description at cbia.com.

Sample Procedure Listing

Type 1

- Routine Exam (1 in 6 months)
- Bitewing X-rays (1 in 12 months)
- Full Mouth/Panoramic X-rays (1 in 5 years)
- Periapical X-rays
- Cleaning (1 in 6 months)
- Fluoride for Children 13 and under (1 in 12 months)

Type 2

- Sealants (age 13 and under)
- Restorative Amalgams
- Restorative Composites
- Endodontics (nonsurgical)
- Endodontics (surgical)
- Periodontics (nonsurgical)
- Periodontics (surgical)
- Denture Repair
- Simple Extractions
- Complex Extractions
- Anesthesia

Type 3

- Space Maintainers
- Onlays
- Crowns (1 in 10 years per tooth)
- Crown Repair
- Endodontics (surgical)
- Periodontics (surgical)
- Prosthodontics (fixed bridge; removable complete/partial dentures) (1 in 10 years)

Monthly Rates	Employee: \$58.44	Employee & Spouse: \$111.20	Employee & Children: \$141.24	Family: \$194.00
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Dental Network Information

To find a provider, visit ameritas.com and select the Providers tab, then Find a Provider, Dental. Enter your criteria to search by location or for a specific dentist or practice.
Note: You may receive care from any provider; however, your out-of-pocket costs may be lower if you choose a provider from the Ameritas dental network.

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.