



Dental Plan Design Summary

Effective Date: 8/1/2017

Plan Benefit	Rescue Plan 1	Apparatus Plan 2	Overhaul Plan 3
Type 1	100%	100%	SmartDollar
Type 2	90%	90%	See summary below
Type 3	60%	60%	
Deductible	\$50/Calendar Year Waived Type 1 \$150/family	\$50/Calendar Year Waived Type 1 \$150/family	NA
Maximum (per person)	\$1,500/Calendar Year	\$1,500/Calendar Year	\$3,000/Calendar Year
PPO	Passive PPO	Passive PPO	Passive PPO
Allowance Type 1	90th U&C	90th U&C	NA
Type 2	90th U&C	90th U&C	NA
Type 3	90th U&C	90th U&C	NA
Waiting Period	None	None	None
Annual Open Enrollment	Included	Included	Included

SmartDollarSM Plan Summary

Eligible Expenses (Plan Pays)			
Benefit Level 1	No SmartDollar	No SmartDollar	0% of first \$250
Benefit Level 2			80% of remaining eligible expenses
Allowance	NA	NA	Discounted Fee

Orthodontia Summary

Allowance All Plan Designs:	In Network, discounted fee. Out of Network, U&C.		
Plan Benefit	No Ortho	50%	No Ortho
Coverage for Adults		Yes	
Lifetime Maximum (per person)		\$1,500	
Waiting Period		12 Months for New Enrollees	

Monthly Rates

Member Only	\$63.57	\$63.57	\$32.59
Member +1 Dependent	\$141.65	\$156.21	\$63.15
Member + 2 or More Dependents	\$180.53	\$221.76	\$92.59

Reliance Standard Life Insurance Company has contracted with **Ameritas** to provide members access to a nationwide dental network as part of this dental plan. Networks are one way to help curb rising benefit costs while reducing out-of-pocket dollars.

- Plan members have the freedom to select any dentist.
- With a network provider, out-of-pocket expenses are generally lower, because network providers agree to charge no more than the discounted fees established for covered procedures.
- Out-of-network dentist charges are usually higher than our discounted fees, so out-of-pocket expenses are likely higher with non-network dentists

If you have any questions, please call - 888-811-0811



Covered Procedure Summary

Plan Design Summary	Rescue Plan 1	Apparatus Plan 2	Overhaul Plan 3
	100/90/60 \$50/Calendar Year Waived Type 1 \$150/family \$1,500	100/90/60 \$50/Calendar Year Waived Type 1 \$150/family \$1,500	0% of first \$250 80% of remaining eligible expenses \$3,000
	Type 1 Procedure(Frequency)	Type 1 Procedure(Frequency)	Sample Procedures all levels
	<ul style="list-style-type: none"> • Routine Exam (2 per benefit period) • Bitewing X-rays (2 per benefit period) • Full Mouth/Panoramic X-rays (1 in 3 years) • Periapical X-rays • Cleaning (2 per benefit period) • Fluoride for Children 15 and under (1 per benefit period) • Sealants (age 15 and under) • Space Maintainers 	<ul style="list-style-type: none"> • Routine Exam (2 per benefit period) • Bitewing X-rays (2 per benefit period) • Full Mouth/Panoramic X-rays (1 in 3 years) • Periapical X-rays • Cleaning (2 per benefit period) • Fluoride for Children 15 and under (1 per benefit period) • Sealants (age 15 and under) • Space Maintainers 	<ul style="list-style-type: none"> • Routine Exam (2 per benefit period) • Bitewing X-rays (2 per benefit period) • Full Mouth/Panoramic X-rays (1 in 3 years) • Periapical X-rays • Cleaning (2 per benefit period) • Fluoride for Children 15 and under (1 per benefit period) • Sealants (age 15 and under) • Space Maintainers • Restorative Amalgams • Restorative Composites • Onlays • Crowns (1 in 5 years per tooth) • Crown Repair • Endodontics (nonsurgical) • Endodontics (surgical) • Periodontics (nonsurgical) • Periodontics (surgical) • Denture Repair • Simple Extractions • Complex Extractions • Anesthesia
	Type 2 Procedure(Frequency)	Type 2 Procedure(Frequency)	
	<ul style="list-style-type: none"> • Restorative Amalgams • Restorative Composites • Endodontics (nonsurgical) • Endodontics (surgical) • Periodontics (nonsurgical) • Periodontics (surgical) • Denture Repair • Simple Extractions • Complex Extractions • Anesthesia 	<ul style="list-style-type: none"> • Restorative Amalgams • Restorative Composites • Endodontics (nonsurgical) • Endodontics (surgical) • Periodontics (nonsurgical) • Periodontics (surgical) • Denture Repair • Simple Extractions • Complex Extractions • Anesthesia 	
	Type 3 Procedure(Frequency)	Type 3 Procedure(Frequency)	
	<ul style="list-style-type: none"> • Onlays • Crowns (1 in 5 years per tooth) • Crown Repair • Prosthodontics (fixed bridge; removable complete/partial dentures) (1 in 5 years) 	<ul style="list-style-type: none"> • Onlays • Crowns (1 in 5 years per tooth) • Crown Repair • Prosthodontics (fixed bridge; removable complete/partial dentures) (1 in 5 years) 	

Current Dental Terminology © American Dental Association.

This form is a benefit highlight, not a certificate of insurance. The coverage outlined here highlights the benefits available through Reliance Standard Life, and does not include exclusions and limitations. For details on exclusions and limitations, or a complete list of covered procedures, contact your benefits coordinator.