

Inshore Benefits Trust

Voluntary Ameritas Dental Plans

Effective January 1, 2020 - December 31, 2020^{5,6}



Benefit Comparison and Rates for 1-500 Employees

BENEFIT SUMMARY VOLUNTARY AMERITAS DENTAL PLANS				
	PPO PLAN 1000		PPO PLAN 1250	
Network	IN	OUT	IN	OUT
Deductible				
Individual	\$50	Combined with PPO	\$50	Combined with PPO
Family	3/Family	Combined with PPO	3/Family	Combined with PPO
Waived for Preventative	Yes	Yes	Yes	Yes
Eligibility				
Group Size Dental Services	1-500 enrolled	1-500 enrolled	1-500 enrolled	1-500 enrolled
Waiting Periods				
Major	12 months ¹	12 months ¹	12 months ¹	12 months ¹
Waived for Major (if there was prior group coverage)	Yes	Yes	Yes	Yes
Dental Services				
Preventative Care	Plan pays based on a Maximum Covered Expense schedule. Member is responsible for costs in excess of covered expenses.		Plan pays based on a Maximum Covered Expense schedule. Member is responsible for costs in excess of covered expenses.	
Basic Services				
Major Services (after 12-month waiting period) ¹				
Periodontal Surgery	See schedule	See schedule	See schedule	See schedule
Endodontic Surgery	See schedule	See schedule	See schedule	See schedule
Orthodontics	Not Covered	Not Covered	Not Covered	Not Covered
Benefit Maximums				
Annual Benefit Maximum	\$1,000	Combined with PPO	\$1,250	Combined with PPO
Voluntary Dental Rates²				
A \$15 monthly administration fee applies to all groups.	Employee Only		Employee +1	Employee +2 or more
PPO Plan 1000	\$33.73		\$60.71	\$93.54
PPO Plan 1250	\$48.29		\$89.40	\$147.81

¹ The waiting period for Type 3 Major Services is 12 months for new group business and for new hires to existing groups. The 12-month Major Services waiting period can be waived for new group enrollment and new hires upon proof of 12 months of continuous prior dental coverage.

² Ameritas Voluntary Dental plans are available to groups headquartered in any of the following states: AZ, CA, NV, UT. The groups' employees can live in any of the 50 states, excluding FL.

Certain industries are ineligible to purchase these plans: Associations and Trusts* (except #8661) 8600-8699; Beauty & Barber Shops 7231-7241; Dentist offices, Dentist labs and Medical labs 8021, 8071, 8072; Employment Agencies 7361-7363; International Affairs 9721; Misc. Business Services 7389; Misc. Services not elsewhere classified 8999; Partnerships No SIC; Private Households 8811; Religious Organizations (except Churches 8661) No SIC; Seasonal Employees (Christmas/Part-time help) No SIC; and Seasonal Employees (Agriculture) 0761-0783. *Management and the administrative staff of associations and trusts are eligible.

The summary above is meant to be a brief description of plan benefits and rates only. This is not a policy. For a complete description of benefits, exclusions, limitations and participation requirements, please consult the contract and/or evidence of coverage and disclosure brochure. Either of these is available upon request. The accuracy of this summary is not guaranteed and the information herein is subject to change without notice. This is not an offer of coverage.