## **Inshore Benefits Trust**

**Voluntary** Ameritas Dental Plans Effective January 1, 2022 - December 31, 2022





## **Benefit Comparison and Rates for 1-500 Employees**

[	BENEFIT SUMMARY   VOLUNTARY AMERITAS DENTAL PLANS					
	PPO PLAN 1000		PPO PLAN 1250			
Network	IN NETWORK	OUT OF NETWORK	IN NETWORK	OUT OF NETWORK		
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 <sup>1</sup>	12 months <sup>1</sup>	12 months <sup>1</sup>	12 months <sup>1</sup>		
Waived for Major (if there was prior group coverage)	Yes	Yes	Yes	Yes		
Dental Services						
Preventive Care						
Basic Services	Plan pays based on a Maximum Covered Expense schedule. Member is responsible		Plan pays based on a Maximum Covered Expense schedule. Member is responsible			
Major Services (after 12-month waiting period) <sup>1</sup>	for costs in excess o		for costs in excess of covered expenses.			
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		

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	PPO PLAN 1000		PPO PLAN 1250				
Network	IN NETWORK	OUT OF NETWORK	IN NETWORK	OUT OF NETWORK			
Benefit Maximums							
Annual Benefit Maximum	\$1,000	Combined with PPO	\$1,250	Combined with PPO			
Voluntary Dental Rates <sup>2</sup> — A \$15 monthly administration fee applies to all groups.							
Employee Only	\$33.73		\$48.29				
Employee +1	\$60.71		\$89.40				
Employee +2 or more	\$93.54		\$147.81				

<sup>&</sup>lt;sup>1</sup>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.

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 summery is not guaranteed and the information herein is subject to change without notice. This is not an offer of coverage.

<sup>&</sup>lt;sup>2</sup> 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.