

# Inshore Benefits

**Voluntary** Ameritas Dental Plans

Effective January 1, 2023\*



## Benefit Comparison and Rates for Individuals and Families

BENEFIT SUMMARY   VOLUNTARY AMERITAS DENTAL PLANS				
	PPO PLAN 1000		PPO PLAN 1250	
Network	IN	OUT	IN	OUT
<b>Deductible</b>				
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
<b>Eligibility</b>				
Group Size Dental Services	1-500 enrolled	1-500 enrolled	1-500 enrolled	1-500 enrolled
<b>Waiting Periods</b>				
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
<b>Dental Services</b>				
Preventive Care	Plan based on a Maximum Covered Expense schedule. Member is responsible for costs in excess of covered expenses.		Plan 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) <sup>1</sup>				
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
<b>Benefit Maximums</b>				
Annual Benefit Maximum	\$1,000	Combined with PPO	\$1,250	Combined with PPO
<b>Voluntary Dental Rates<sup>2</sup> - A \$5 monthly administration fee applies to all individuals.</b>				
Subscriber Only	\$33.73		\$48.29	
Subscriber +1	\$60.71		\$89.40	
Subscriber +2 or more	\$93.54		\$147.81	

<sup>1</sup>The waiting period for Type 3 Major Services is 12 months for new group business and for new enrollees. The 12-month Major Services waiting period can be waived for individuals and families upon proof of 12 months of continuous prior dental coverage.

<sup>2</sup>Ameritas Voluntary Dental plans are available to individuals residing in the following states: AZ, CA, NV, UT.

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.

\* Rates are subject to change. Check with Inshore Benefits for the most current benefits and rates for your requested effective date.