

## Plan 1: Low Plan Summary

Effective Date: 1/1/2025

<b>Plan Benefit</b>	
Type 1	100%
Type 2	80%
Type 3	50%
<b>Deductible</b>	\$50/Calendar Year Type 2 & 3 Waived Type 1 \$150/family
<b>Maximum (per person)</b>	\$1,750 per calendar year
<b>Allowance</b>	95th U&C
<b>Waiting Period</b>	None
<b>Annual Eye Exam</b>	None
<b>Annual Open Enrollment</b>	Included

## Orthodontia Summary - Child Only Coverage

<b>Allowance</b>	U&C
<b>Plan Benefit</b>	50%
<b>Lifetime Maximum (per person)</b>	\$1,000
<b>Waiting Period</b>	None

## Sample Procedure Listing (Current Dental Terminology © American Dental Association.)

Type 1	Type 2	Type 3
<ul style="list-style-type: none"> <li>Routine Exam (2 in 12 months)</li> <li>Bitewing X-rays (1 in 12 months)</li> <li>Full Mouth/Panoramic X-rays (1 in 5 years)</li> <li>Periapical X-rays</li> <li>Cleaning (2 in 12 months)</li> <li>Fluoride for Children 18 and under (2 in 12 months)</li> <li>Sealants (age 15 and under)</li> <li>Space Maintainers</li> </ul>	<ul style="list-style-type: none"> <li>Fillings for Cavities</li> <li>Restorative Composites (anterior and posterior teeth)</li> <li>Endodontics (nonsurgical)</li> <li>Endodontics (surgical)</li> <li>Periodontics (nonsurgical)</li> <li>Periodontics (surgical)</li> <li>Denture Repair</li> <li>Simple Extractions</li> <li>Complex Extractions</li> <li>Anesthesia</li> </ul>	<ul style="list-style-type: none"> <li>Onlays</li> <li>Crowns (1 in 10 years per tooth)</li> <li>Crown Repair</li> <li>Implants</li> <li>Prosthetics (fixed bridge; removable complete/partial dentures) (1 in 10 years)</li> </ul>

## Monthly Rates

<b>Employee Only (EE)</b>	\$47.08
<b>EE + Spouse</b>	\$92.12
<b>EE + Children</b>	\$108.78
<b>EE + Spouse &amp; Children</b>	\$161.72

## Ameritas Information

### We're Here to Help

This plan was designed specifically for the associates of **Cartersville City Schools**. At Ameritas Group, we do more than provide coverage - we make sure there's always a friendly voice to explain your benefits, listen to your concerns, and answer your questions. Our customer relations associates will be pleased to assist you 7 a.m. to midnight (Central Time) Monday through Thursday, and 7 a.m. to 6:30 p.m. on Friday. You can speak to them by calling toll-free: 800-487-5553. For plan information any time, access our automated voice response system or go online to [ameritas.com](http://ameritas.com).

## Dental Health Scorecard

How would you rate your dental health?

In 2016, you can receive your Dental Health Report Card by signing into your secure member account online. Your assessment is based on claims submitted. The report card also offers suggestions if you strive to improve your dental health. Ameritas members can access the personalized report card by going to [ameritas.com](http://ameritas.com), click Account Access in the top right corner and choose the Dental/Vision/Hearing drop down. Select the Secure Member Account link and sign in to see your report.

### Rx Savings

Our valued plan members and their covered dependents can save on prescription medications at over 60,000 pharmacies across the nation including CVS, Walgreens, Rite Aid and Walmart. This Rx discount is offered at no additional cost, and it is not insurance.

To receive this Rx discount, Ameritas plan members just need to visit us at [ameritas.com](http://ameritas.com) and sign into (or create) a secure member account where they can access and print an online-only Rx discount savings ID card.

### Eyewear Savings

Ameritas plan members may receive up to 10% off eyewear frames and lenses purchased at any Walmart Vision Center nationwide. Members may also bring in their current vision prescription from any vision care provider and purchase eyewear at Walmart. This savings arrangement is not insurance: it is available to members at no additional cost to their plan premium.

To receive the eyewear savings identification card, Ameritas plan members can visit [ameritas.com](http://ameritas.com) and sign-in (or create) a secure member account. Members must present the Ameritas Eyewear Savings Card at time of purchase to receive the discount.

### Hearing Savings

With your Ameritas plan, you can receive hearing aid discounts through Great Hearing Benefits at their 4,500+ hearing care locations nationwide. Call 877-683-9495 for your free hearing consultation today. This savings arrangement is not insurance. It is available to members at no additional cost to their plan premium.

Highlights include: hearing exam for only \$50 (saves you \$100 off the industry average of \$150), up to 50% off retail pricing on today's top hearing technology, plus a satisfaction guarantee and warranty service. Visit [greatearingbenefits.com/ameritas](http://greatearingbenefits.com/ameritas) to learn more.

### Dental Network Information

To find a provider, visit [ameritas.com](http://ameritas.com) and select **FIND A PROVIDER**, then **DENTAL**. Enter your criteria to search by location or for a specific dentist or practice. California Residents: When prompted to select your network, choose the Ameritas Network found on your ID Card or contact Customer Connections at 800-487-5553.

Your provider network is Ameritas Classic and Plus Network.

### Pretreatment

While we don't require a pretreatment authorization form for any procedure, we recommend them for any dental work you consider expensive. As a smart consumer, it's best for you to know your share of the cost up front. Simply ask your dentist to submit the information for a pretreatment estimate to our customer relations department. We'll inform both you and your dentist of the exact amount your insurance will cover and the amount that you will be responsible for. That way, there won't be any surprises once the work has been completed.

### Open Enrollment

If a member does not elect to participate when initially eligible, the member may elect to participate at the policyholder's next enrollment period. This enrollment period will be held each year and those who elect to participate in this policy at that time will have their insurance become effective on January 1. If you do not enroll during your company's open enrollment period, then you will be subject to the Late Entrant Provision.

### Late Entrant Provision

We strongly encourage you to sign up for coverage when you are initially eligible. If you choose not to sign up during this initial enrollment period, you will become a late entrant. Late entrants will be eligible for only exams, cleanings, and fluoride applications for the first 12 months they are covered.

### Section 125

This plan is provided as part of the Policyholder's Section 125 Plan. Each employee has the option under the Section 125 Plan of participating or not participating in this plan. If an employee does not elect to participate when initially eligible, he/she may elect to participate at the Policyholder's next Annual Election Period.

### Plan 2: High Plan Summary

Effective Date: 1/1/2025

<b>Plan Benefit</b>	
Type 1	100%
Type 2	80%
Type 3	80%
<b>Deductible</b>	\$0/Calendar Year Type 2,3 Waived Type 1 No Family Maximum
<b>Maximum (per person)</b>	\$2,250 per calendar year
<b>Allowance</b>	95th U&C
<b>Waiting Period</b>	None
<b>Annual Eye Exam</b>	None
<b>Annual Open Enrollment</b>	Included

### Orthodontia Summary - Child Only Coverage

<b>Allowance</b>	U&C
<b>Plan Benefit</b>	50%
<b>Lifetime Maximum (per person)</b>	\$1,000
<b>Waiting Period</b>	None

### Sample Procedure Listing (Current Dental Terminology © American Dental Association.)

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<ul style="list-style-type: none"> <li>Routine Exam (2 in 12 months)</li> <li>Bitewing X-rays (1 in 12 months)</li> <li>Full Mouth/Panoramic X-rays (1 in 5 years)</li> <li>Periapical X-rays</li> <li>Cleaning (2 in 12 months)</li> <li>Fluoride for Children 18 and under (2 in 12 months)</li> <li>Sealants (age 15 and under)</li> <li>Space Maintainers</li> </ul>	<ul style="list-style-type: none"> <li>Fillings for Cavities</li> <li>Restorative Composites (anterior and posterior teeth)</li> <li>Endodontics (nonsurgical)</li> <li>Endodontics (surgical)</li> <li>Periodontics (nonsurgical)</li> <li>Periodontics (surgical)</li> <li>Denture Repair</li> <li>Simple Extractions</li> <li>Complex Extractions</li> <li>Anesthesia</li> </ul>	<ul style="list-style-type: none"> <li>Onlays</li> <li>Crowns (1 in 10 years per tooth)</li> <li>Crown Repair</li> <li>Implants</li> <li>Prosthodontics (fixed bridge; removable complete/partial dentures) (1 in 10 years)</li> </ul>

### Monthly Rates

<b>Employee Only (EE)</b>	\$70.66
<b>EE + Spouse</b>	\$137.64
<b>EE + Children</b>	\$144.42
<b>EE + Spouse &amp; Children</b>	\$225.62

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