

Mississippi Valley State University

Policy #: 406360

Effective Date: January 1, 2018

Plan Design Summary

Dental Summary	Edge Plus Plan A			
Benefits Based on 75 th Usual & Customary	1st Year	2nd Year	Thereafter	
Type 1 - Preventive Procedures Fluoride Treatments (under age 19), X-Rays, Cleanings, Periodic Exams Benefit Year Deductible Plan Benefit	\$0 100%	\$0 100%	\$0 100%	
Type 2 - Basic Procedures Simple Extractions, Fillings, Root Canals, Non-Surgical Periodontics Benefit Year Deductible Plan Benefit	\$50 80%	\$50 80%	\$50 80%	
Type 3 - Major Procedures Removal of Impacted Teeth, Bridges, Crowns, Dentures, Partials, Surgical Periodontics Benefit Year Deductible Plan Benefit	Not Covered	\$50 50%	\$50 50%	
Benefit Year Maximum Type 1, 2, and 3	\$750	\$1,000	\$1,500	
Orthodontia (under age 19) Lifetime Deductible Plan Benefit Lifetime Benefits	Not Covered	Not Covered	\$50 50% \$1,000	

Monthly Rates

Employee	\$57.86
Employee +1 Dependent	\$112.60
Employee +2 or More Dependents	\$165.79

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Covered Procedure Summary

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- Routine Exam (1 in 6 months)
- Bitewing X-rays (1 in 6 months)
- Full Mouth/Panoramic X-rays (1 in 3 years)
- Periapical X-rays
- Cleaning (1 in 6 months)
- Fluoride for Children 18 and under (1 in 12 months)
- Space Maintainers
- Sealants

Type 2

- Restorative Amalgams
- Restorative Composites
- Simple Extractions
- Root Canals/Endodontics
- Periodontics (non-surgical)
- Anesthesia

Type 3

- Denture Repair
- Onlays/Inlays
- Crowns
 (1 in 5 years per tooth)
- Crown Repair
- Surgical Extractions
- Prosthodontics (fixed bridge, removable complete/partial dentures) (1 in 5 years)
- Periodontics (surgical)

Member Savings

You may receive additional savings that can reduce out of pocket expenses:

- Save up to 15% off eyewear frames and lenses purchased at any Walmart Vision Center nationwide (savings does not include contact lenses or vision care materials)
- Save on prescription medications through any Walmart or Sam's Club pharmacy (membership at Sam's Club not required)

Dental Network Information

With our dental plans, you can receive care from any dentist you choose. However, with one of our dental network providers, your out-of-pocket costs will almost always be less. That's because these providers agree to charge a discounted network fee for each covered procedure.

Open Enrollment

If you do not elect to participate when initially eligible, you may elect to participate at the policyholder's next enrollment period, which normally coincides with the policy anniversary date.

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.

Your Agent's information

John Nichols (662) 455-9729

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