Auburn University
Dental Highlight Sheet

Ameritas

Enhanced Plan: Dental Plan Summary **Effective Date: 1/1/2027**

Plan Benefit	
Type 1	100%
Type 2	80%
Type 3	80%
Deductible	$25/Calendar Year Type 2 & 3 Waived Type 1 $75/family
Maximum *(per person)*	$1,500 per calendar year
Preventive Plus℠	Included
Allowance	Discounted Fee **(Applies to both In Network and Out of Network Claims)**
Waiting Period	None

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

Type 1	Type 2	Type 3
• Routine Exam (2 per benefit period)	• Fillings for Cavities	• Onlays
• Bitewing X-rays (2 per benefit period)	• Restorative Composites	• Crowns
• Full Mouth/Panoramic X-rays (1 in 3 years)	• Endodontics	(1 in 5 years per tooth)
• Periapical X-rays	• Denture Repair	• Crown Repair
• Cleaning (2 per benefit period)	• Simple Extractions	• Prosthodontics (fixed bridge; removable
• Fluoride for Children 18 and under(2 per benefit period)	• Complex Extractions	complete/partial dentures)
• Sealants (age 13 and under)	• Anesthesia	(1 in 5 years)
• Space Maintainers		

Preventive Plus℠

With this plan option, benefits for Type 1/Preventive procedures are not deducted from the plan member's annual maximum benefit. This saves the entire annual maximum for the Type 2/Basic and Type 3/Major procedures that are covered by your plan.

Ameritas Information

We're Here to Help

This plan was designed specifically for the associates of Auburn University. 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 during open enrollment by calling toll-free: **(877) 313-0033.**
ID cards will be mailed to enrollment members in late December.

Dental Network Information

While members can utilize the dental provider of their choice, using a provider that is part of **Ameritas' Classic and Plus PPO Network** offers the greatest opportunity for cost savings**.** Out-of-network providers are reimbursed at the same allowance as the discounted fee accepted by network providers, so the plan encourages members to use a network provider for the lowest out of pocket costs.

To find a provider, visit 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.

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.

This document is a highlight of plan benefits provided by Ameritas Life Insurance Corp. as selected by your employer. It is not a certificate of insurance and does not include exclusions and limitations. For exclusions and limitations, or a complete list of covered procedures, contact your benefits administrator.