



Dental Plan Summary

Effective Date: 1/1/2021

Coinsurance Levels:	
Type 1	100%
Type 2	60%
Type 3	50%
Deductible	\$50/Calendar Year, Type 2 & 3 Deductible is Waived for Type 1 Maximum Deductible Per Family: \$150
Maximum (per person)	\$1,250 per calendar year
Dental Rewards®	Included
Waiting Period	12 months on Type 3 Procedures Waived for any enrolling 1/1/2021

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

Type 1	Type 2	Type 3
<ul style="list-style-type: none"> Routine Exam (1 in 6 months) Bitewing X-rays (1 in 12 months) Cleaning (1 in 6 months) Fluoride for Children 18 and under (1 in 6 months) Sealants (age 15 and under) 	<ul style="list-style-type: none"> Full Mouth/Panoramic X-rays (1 in 5 years) Periapical X-rays Space Maintainers Restorative Amalgams Restorative Composites (anterior and posterior teeth) Simple Extractions Anesthesia Pre-Diagnostic Test (age 35 and over) (1 in 2 years) 	<ul style="list-style-type: none"> Onlays Crowns (1 in 10 years per tooth) Crown Repair Endodontics (nonsurgical) Endodontics (surgical) Periodontics (nonsurgical) Periodontics (surgical) Denture Repair Prosthodontics (fixed bridge; removable complete/partial dentures) (1 in 10 years) Complex Extractions

Dental Rewards®

This dental plan includes a valuable feature that allows plan members to carry over part of their unused annual maximum. A member must submit at least one claim during the benefit year while staying at or under the plan-specific threshold amount. Earns an extra reward, called the PPO Bonus, by seeing a Network Provider. Team Members and their covered dependents may accumulate rewards up to the stated maximum carry-over amount, then use those rewards for any covered dental procedures subject to applicable coinsurance and plan provisions. If a plan member doesn't submit a dental claim during a benefit year, all accumulated rewards will be lost; but he or she can begin earning rewards again the very next year.

Benefit Threshold	\$500	Dental benefits received for the year cannot exceed this amount
Annual Carryover Amount	\$250	Dental Rewards amount is added to the following year's maximum
Annual PPO Bonus	\$100	Additional bonus is earned if the member sees a network provider
Maximum Carryover	\$1,000	Maximum possible accumulation for Dental Rewards and PPO Bonus combined

Rates Per Pay Period (based on 26 pay periods per year)

Team Member Only	\$13.05
Team Member + Spouse	\$26.48
Team Member + Children	\$30.37
Team Member + Spouse & Children	\$46.47

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.



Preventive PlusSM

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.

Maternity Benefit

Because we want to keep expectant mothers as healthy as possible, our maternity dental benefit provides an additional comprehensive evaluation and cleaning during pregnancy.

Freedom to Choose Any Dental Provider with the Added Value of a Dental Network

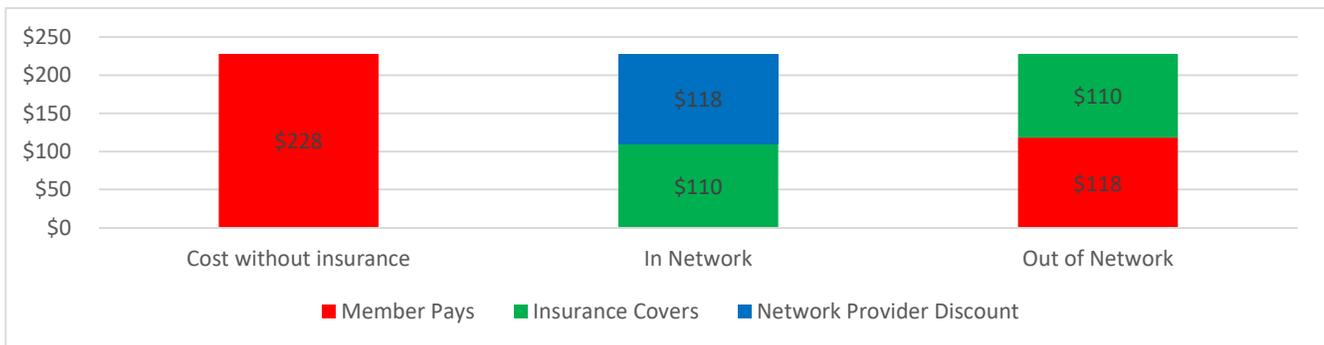
Enrolled members can see any licensed dental provider for service. By using an Ameritas PPO provider, enrolled members will receive the highest levels of covered benefits under the plan. In addition, members can be assured that Ameritas Dental PPO providers have met stringent criteria related to quality, process, service standards and legal requirement.

Ameritas PPO providers have agreed to negotiated fees which usually result in savings to the member. By using a PPO provider, members are not subject to back billing for amounts that exceed the charge that a provider would normally charge and the negotiated fee that Ameritas PPO providers have agreed to accept.

For out of network providers, the same negotiated fee that Ameritas allows for each procedure for Ameritas PPO providers will be used to determine out of network benefits allowed. If an out of network provider is used, the member will be responsible to pay the difference for any amounts that the provider charges for each procedure and the amount allowed by the plan.

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.

Dental Cost Illustration:



A preventive visit in Texas (ZIP Code 752XX) with an exam, cleaning, and x-rays is approximately \$228. These are Type 1 services which are covered at 100% with no deductible.

Providers in the Ameritas Dental Network typically charge 25-50% below average for their region, which lowers your out-of-pocket costs. In this example, the network discount is \$118 so the charge allowed for the services is \$110. Because the benefit coverage is 100%, the member pays nothing for these services in-network.

Insurance covers the same \$110 for these services out-of-network. However, there is no network discount when visiting an out-of-network provider. So, the member pays the difference between the dentist's charge and the insurance coverage, which is \$118 in this example.

Ameritas Information

We're Here to Help

This dental program was designed specifically for the associates of **TNG Retail Services**. 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.

During open enrollment, call Ameritas' Enrollment Support Welcome Line at 877-219-1115 to ask questions about the plans, how work in progress will be handled, find a PPO provider, and more!

After your plan goes into effect on 1/1/2021, you can speak to our Customer Relations team, call toll-free: 800-487-5553.

For plan information after your coverage goes into effect, access our automated voice response system or go online to ameritas.com.



Open Enrollment and Changing Coverage Down the Road

If you do not elect to participate in this dental program when initially eligible, you will not be able to elect coverage again until the next annual enrollment period unless you have a qualified life event.

Once a dental plan option is chosen during open enrollment, you will be required to remain in that plan until the next annual election period unless you have a qualified life event. At the next annual election period, you will be able to change your election.

The annual enrollment period will be held each year, and those who elect to enroll 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.

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.

Dental Cost Estimator

Ever wonder what a dental procedure usually costs? The answer can be found using the Ameritas group division's Dental Cost Estimator tool located in our Secure Member Account portal.

Members can search by ZIP Code for a specific dental procedure and see fee range estimates for out-of-network general dentists in that area. Of course, we always suggest that members partner with their dentists, so they know what's involved in any recommended treatment plan.

The estimator tool is powered by Go2Dental and uses FAIR Health data that is updated annually. Please note, cost estimates do not reflect discounted rates available through provider networks, and the estimator does not include orthodontic estimates at this time.

In addition, when members are in their Secure Member Account, they can:

- Go paperless with electronic Explanation of Benefits statements and reduce the clutter in their mailboxes
- View their certificate of insurance and specific plan benefits information
- Access value-added extras like the Rx discount ID card

Additional Ways to Save With the Ameritas Dental Options: Eyewear Savings

Ameritas dental 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 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.

Even More Ways to Save with the Ameritas Dental Options: 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 and sign into (or create) a secure member account where they can access and print an online-only Rx discount savings ID card.

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.