

# **Hospitality Industry Health Insurance Trust**

### **2024** Dental Plans

H.I.H.I.T. Plan	Plan I	Plan II	Plan III	Plan IV	Plan V	Plan VI	Plan VII	Ortho
Annual Deductible (Waived on Type 1)	\$50 \$150 Family Max	\$50 \$150 Family Max	\$50 \$150 Family Max	\$50 \$150 Family Max	\$50 \$150 Family Max	\$50 \$150 Family Max	\$50 \$150 Family Max	Orthodontia may be added to any plan option. Orthodontia coverage is for children only.
Annual Maximum	\$1,000	\$1,500	\$2,000	\$1,500	\$1,000 - \$2,000	\$2,000 - \$3,200	\$2,500	
Dental Rewards	Included	Included	Included	Included	Included	Included	Included	
Preventative Plus	Included	Included	Included	Included	Included	Included	Included	
Type 1		· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·				Ortho Plan I
Cleanings Exams	100%	100%	100%	100%	100%	100%	100%	50% of \$1,000 Lifetime Maximum. Add
Sealants Fluoride								\$5.77 to EE + Child(ren) and
X-Rays								\$7.07 to EE + Family rates.
Туре 2	I						I	Ortho Plan II
Fillings	80%*	90% In- Network 80% Out of Network	90% In- Network 80% Out of Network	80-100% In- Network 80% Out of Network	80%	80%	80%	50% of \$1,500 Lifetime Maximum. Add \$8.07 to EE + Child(ren) and
Endodontics*								
Periodontics*								
Oral Surgery*								\$9.90 to EE + Family rates.
Туре З		·						Ortho Plan III
Crowns	50%	50%	50%	50%	50%	50%	50%	50% of \$2,000
Implants								Lifetime Maximum. Add
Bridges								\$10.28 to EE + Child(ren) and
Dentures								\$12.37 to EE + Family rates.
Rates – Guaranteed 1	/1/2024 – 12	/31/2024					-	
Employee Only	\$36.89	\$47.43	\$53.72	\$46.17	\$39.24	\$52.95	\$58.64	**All Ortho Plans
EE + Spouse	\$73.79	\$94.89	\$107.43	\$101.47	\$78.46	\$105.92	\$117.26	<ul> <li>have a 12 month</li> <li>waiting period</li> <li>for new</li> <li>enrollees.</li> </ul>
EE + Child(ren)	\$78.41	\$98.17	\$110.08	\$104.98	\$83.38	\$108.53	\$114.71	
EE + Family	\$124.70	\$157.08	\$176.57	\$167.97	\$132.60	\$174.08	\$186.51	

\*For Plan 1 - Endodontics, Periodontics and Oral Surgery are covered under Type 3.

\*Preventive PLUS: Preventive services/Procedures are not deducted from the members annual max.



\*\*This material is intended for informational purposes only. For specific plan details, please reference plan summaries\*\*

# Using your benefits is easy

### Visit any dental provider

You are free to visit any provider, including your current dentist, regardless if they are in- or out-of-network. Plus, your family members do not have to see the same dentist.



### Save with a network provider

The Ameritas Dental Network is one of the nation's largest. Network providers have agreed to charge 25-50% less than their regular rates which can lower your out-of-pocket costs. See if your dentist is in the network. Visit **ameritas.com – Find a Provider**, and check the plan highlight in this booklet for your dental network name.

### Quickly access your information

With your secure online member account, you can check plan benefits and claim status, sign up for electronic benefit statements, access discount ID cards, and much more. Just go to **ameritas.com** and select Account Access, Dental/Vision/Hearing, Secure Member Account and Register Now to get started after your benefit coverage begins.

# Make Your Dental Plan Benefits Go Even Further





#### 1. Earn rewards by using your dental plan benefits.

- Visit your dentist at least once each year.
- . Keep your total paid claims for the year under your benefit threshold.

#### 2. Use your rewards.

- · Apply your rewards toward covered dental procedures after your existing benefit is used.
- You and any covered dependents have your own rewards accounts.



#### 3. Make the most of your reward accumulation.

- Each year paid claims remain under the threshold, your rewards will increase until you reach the maximum reward accumulation.
- If you exceed your annual benefit threshold, you keep the rewards you've previously earned but don't earn
  new ones.
- If you don't use your dental benefits during the entire year, your accumulated rewards are lost, but you can begin earning rewards again the next year.

Rewards are subject to the applicable deductible, coinsurance and plan provisions.

**PPO Bonus:** When you visit an Ameritas Dental Network provider, you earn additional rewards to add to your annual carryover amount. Plus, your out-of-pocket expenses are usually 25-50% lower when you visit a network provider.

## For more information about these plan options, please contact your broker or H.I.H.I.T. at 425-777-4650 or hihit@tbsmga.com



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