

Ameritas/The Principal **PPO DENTAL NETWORK**

The Business Council of New York State, Inc. • 026-50004

BENEFITS PROVIDED UNDER THIS POLICY AND ANY LIMITATIONS THAT MAY APPLY TO YOU OR YOUR INSURED DEPENDENTS ARE OUTLINED IN YOUR CERTIFICATE OF INSURANCE. THIS IS NOT A GUARANTEE OF BENEFITS. BENEFITS ARE DETERMINED AT THE TIME THE CLAIM IS FILED.

Signature of Insured



A UNIFI Company

**YOU HAVE THE FREEDOM TO SELECT THE DENTIST OF YOUR CHOICE.
CHOOSING A PPO DENTIST CAN REDUCE YOUR OUT-OF-POCKET EXPENSE!**

- FOR PATIENT BENEFIT QUESTIONS, CALL 800-659-5556.
- VISIT OUR WEBSITE AT **WWW.FIRSTAMERITASGROUP.COM/BCNYS/** FOR THE MOST CURRENT LIST OF PPO PROVIDERS, CLAIM FORMS, OR FOR BENEFITS AND CLAIM STATUS INFORMATION.
- PROVIDER LISTS AND CLAIM FORMS MAY ALSO BE OBTAINED FROM YOUR EMPLOYER. WE WILL ALSO ACCEPT YOUR DENTIST'S CLAIM FORM OR SUPER BILL.
- PRESENT THIS CARD AT YOUR APPOINTMENT.
- YOU OR YOUR DENTIST CAN MAIL THE CLAIM TO: **GROUP DENTAL, PO BOX 82595, LINCOLN, NE 68501** OR FAX THE CLAIM TO **402-467-7336**.
- IF VISITING A PPO DENTIST, YOUR BENEFITS WILL BE PAID DIRECTLY TO OUR PPO DENTIST.