

unum dental plan highlights

By participating in the Unum dental program, you can get the benefits you need to make regular dental care more affordable. General plan highlights for Dental 100 and 150 are illustrated below.

	Dental 100	Dental 150
coinsurance levels		
Type 1 — Preventive • cleanings, exams, bitewing x-rays, twice per benefit period • oral/facial images instead of bitewing x-rays • full-mouth or panoramic x-rays, once per 36 months • vertical bitewings, once per 36 months, counts toward the overall frequency for bitewing x-rays • fluoride under age 19 twice in a benefit period • sealants under age 19 for dependents on permanent molars, once per 36 months • space maintainers under age 14 for dependents • palliative treatment	100%	80%
Type 2 — Basic • restorative amalgam and resin fillings • oral surgery, extractions and denture repair • endodontics (root canals) • periodontics (gum disease)	80%	50%
Type 3 — Major • restorative - onlays and crowns • prosthodontics - fixed pontics and abutments • prosthodontics - removable and fixed partial dentures • implants - approved pretreatment estimate from Ameritas is REQUIRED	60%	50%
Type 5 — Orthodontia • Claims are paid by releasing 25% of maximum benefit available at time appliance is placed, payments issued quarterly for 24 months or length of treatment, whichever is less. Quarterly payment dates work from the placement date.	50% up to the lifetime maximum	50% up to the lifetime maximum
deductibles		
Type 1 — Preventive Type 2, 3 — Basic, Major • calendar year per person • calendar year per family Type 5 — Orthodontia	Waived \$100 \$300 Waived	Waived \$150 \$450 Waived
maximums		
Type 1, 2, 3 — Preventive, Basic, Major • calendar year per person • Plan includes Dental Rewards. So each calendar year, if you submit a claim for a dental visit at least once, and your total paid claims are less than \$750, you will carryover \$250 toward the next year's annual maximum (up to a maximum of \$1,000 in carryover rewards). If a claim is not received in prior benefit period, any earned carryover is lost. Type 5 — Orthodontia • lifetime benefit per person	\$1,500 annual maximum \$2,000 lifetime maximum	\$1,000 annual maximum \$2,000 lifetime maximum
Dental Rewards®		
With Dental Rewards' increasing annual maximum feature, you can "earn" additional money toward future years' annual maximums. Qualify for rewards by submitting at least one claim per year for a covered procedure and keeping total paid claims under the plan's annual benefit threshold limit. Annual Benefit Threshold Limit Carryover Amount Maximum Accumulated Amount	\$750 \$250 \$1,000	\$500 \$250 \$1,000

For a claim form or for more information, please visit ameritasgroup.com/unum. Mail claims to Ameritas Group, P.O. Box 82520, Lincoln NE 68501-2520, or have your provider submit them electronically using payer ID 47009.

If you have benefit or claim questions, please call Ameritas Group at 800.487.5553
Monday-Thursday 8 a.m.-1 a.m. and Friday 8 a.m.-7:30 p.m. ET.



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