

Dental Benefit Summary



Coinsurance	
Type 1 - Preventive & Restorative Procedures	100% of U&C *
Type 2 - Basic Procedures	100% of U&C *
Type 3 - Major Procedures	60% of U&C *
Type 4 - TMJ Procedures	50% of U&C *
Deductible	\$0/Calendar Year
Maximum (per person)	\$2,000/Calendar year
TMJ Maximum (per person)	\$1,800/Lifetime

* Usual & Customary. See page 2 for more information.

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

Type 1 – Preventive & Restorative	Type 2 – Basic	Type 3 - Major	Type 4 – TMJ
<ul style="list-style-type: none"> • Routine Exam (2 per calendar year) • Bitewing X-rays (2 per calendar year) • Full Mouth/Panoramic X-rays (1 in 3 years) • Cleaning (2 per calendar year) • Fluoride for Children 18 and under (1 per calendar year) • Sealants (age 18 and under) 	<ul style="list-style-type: none"> • Periapical X-rays • Space Maintainers • Restorative Amalgams • Restorative Composites • Endodontics - including root canal therapy (surgical & nonsurgical) • Periodontics (surgical & nonsurgical) • Denture Repair • Simple Extractions • Complex Extractions • Anesthesia 	<ul style="list-style-type: none"> • Onlays • Crowns (1 in 5 years per tooth) • Crown Repair • Veneers • Implants • Prosthodontics (fixed bridge; removable complete/partial dentures) (1 in 5 years) 	<ul style="list-style-type: none"> • Temporomandibular Joint Dysfunction

Orthodontia Summary - Adult and Child Coverage

Coinsurance	50%
Deductible	\$0
Lifetime Maximum (per person)	\$2,500

For orthodontic programs already in progress when this plan goes into effect on January 1, 2013, the lifetime maximum benefit payments from your previous plan will be taken over by Ameritas. Your lifetime orthodontic maximum will not start over but will continue to ensure your full benefit is not reduced by the change of carriers. To calculate the remaining orthodontic benefit, Ameritas will determine the orthodontic benefit under this plan then subtract any benefit paid under the prior dental plan to ensure the full lifetime benefit payment continues.

Ameritas will calculate the orthodontic benefit and establish payments based on the frequency required by the orthodontist. The payment frequency required by the orthodontist may vary by provider, such as full payment at the time bands are placed, monthly payments, quarterly payments, or annual payments. Because of these varying payment requirements, the frequency of the orthodontic benefit payments will be customized for each treatment program and may vary for each patient.

Additional benefits for expectant moms, heart disease management, and diabetics

Your plan allows an additional routine exam, cleaning or periodontal maintenance per benefit period for pregnancy, diabetes or heart disease management. For these benefits to be considered, please visit our website at www.ameritas.com/group/olbc/sas institute to complete and submit the appropriate forms to Ameritas. For additional questions about these benefits, please call our dedicated toll free line at 888-234-0706.

Provider Choice

Members are able to use any licensed dental provider of their choice. Our plans include access to Ameritas' PPO. There is no difference in coinsurance, deductible or maximum benefit if an out of network provider is used, however, you will likely have lower out of pocket costs when visiting an Ameritas Participating Provider due to negotiated fees.

To find a participating provider, visit ameritasgroup.com and select **FIND A PROVIDER**, then **DENTAL**. Enter your criteria to search by location or for a specific dentist or practice.

What is U&C?

* Plan members are reimbursed for out of network procedures based on the Usual and Customary allowance (U&C) for the dentist's ZIP Code area. Allowances are set at the 90th percentile, which means that 9 out of 10 dentists in a specific ZIP Code area charge at or below the plan allowance for a procedure. We review our U&C allowances annually. In network procedures are reimbursed based on negotiated fees.

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.

Ameritas Information

We're Here to Help

This plan was designed specifically for the associates of **SAS Institute Inc.** 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 8:00 a.m. - 1:00 a.m. (Eastern Time) Monday through Thursday, and 8:00 a.m. - 7:30 p.m. on Friday.

Dedicated toll free number for SAS Institute Inc.:

888-234-0706

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, refer to the SAS Health Care Plan Summary Plan Description (SPD). Should there be a discrepancy between the Dental Benefit Summary and the SPD, the SPD shall prevail.

