



What's new in 2017?

Duncan Aviation chose Ameritas as your new dental carrier. Ameritas has offered dental benefits since 1959 and is a certified Center of Excellence in customer service. Benefits are available with any dental provider. For added savings, the dental plan includes access to the Ameritas Classic PPO network. Network providers agreed to contracted fees which result in out-of-pocket savings for you.

The new orthodontia plan also provides more convenience. The previous orthodontia plan paid benefits on a 6-month schedule. The new orthodontia plan pays benefits quarterly.

When do my dental plan benefits change?

When you enroll in the dental plan, your Ameritas dental benefits begin on January 1, 2017.

The dental benefit summaries are available in your enrollment material and online at:

<http://www.ameritas.com/group/olbc/DuncanAviation>

Does the new plan cover in-progress dental procedures?

The Ameritas dental plan benefits apply to services received beginning January 1, 2017.

Ameritas does not have access to your claim history prior to January 1, 2017. Your dentist can provide documentation relating to previous corresponding services on the claim form. If further information is required, your dental explanation of benefits will include a note confirming that the claim can be reviewed with further information. You can provide that information by phone, fax or secure email.

How can I avoid costly surprises with my dental treatment?

You have the option to submit a pretreatment estimate for any service – this is recommended for any treatment plan likely to exceed \$300. When submitting a pretreatment estimate, you and your dental office will receive a written response showing what Ameritas estimates your dental plan to pay. It is valid for 12 months and will be based on your available benefits and enrollment at the time the service is performed. For example, if you exceed your maximum allowable benefit for other services before the pretreatment estimate is complete, you may not have any remaining benefits available. The reverse is also true: If you have a pretreatment estimate in December and the work is performed in January, your deductible and annual maximum will have renewed.

Am I required to use a network provider for my dental services?

No. Under your plan, you and your covered dependents have the choice to visit any licensed dental provider. The difference is that network providers have agreed to offer a PPO discount. If you visit an out-of-network provider and the office fee exceeds the plan allowance, you pay the difference. On average, members save about 30% out-of-pocket by utilizing an Ameritas network provider.

How do I know if my dental provider is part of the Ameritas network?

To find a participating provider, visit our website at ameritas.com and select FIND A PROVIDER, then DENTAL and follow the "network provider" link. Enter your criteria to search by location or for a specific dentist or practice. You may also call the Ameritas customer service line for assistance.

Who is eligible for orthodontia benefits?

The orthodontia benefit is available for children and adults. With 24 month programs, banding must be completed while the coverage is in effect in order to receive the full benefit.

Which dentist may I use for orthodontia treatment?

You may visit a provider in or out of the Ameritas network. Providers include orthodontists and general dentists who offer orthodontic services through additional training.

How will my orthodontia benefit apply if treatment already began?

For orthodontia programs that were covered under your prior plan, and are in progress, Ameritas will coordinate benefits between the old plan and the new plan to make sure members receive the remaining maximum benefit. For example, if the old plan paid \$750 toward your orthodontia treatment plan, you would still be eligible for an additional \$750 under the Ameritas plan. Ameritas reimburses orthodontic payments quarterly, at the end of the quarter.

Do I need an ID card?

An ID card is not required to receive benefits toward your dental services. However, many dental providers will request it. Your ID cards are printed and mailed to your home address. You may also access your ID card through the secure member portal. There is a shortcut on your [online benefit center](#), or you may use this link: [Register for Secure Online Access](#)

How can I find out more information about my dental plan?

Prior to January 1, 2017, please call your special welcome line at **877-508-9255**.

For future assistance, please contact:

Ameritas Group Customer Connections
800-487-5553
Monday – Thursday 7:00 a.m. to midnight CT
Friday 7:00 a.m. to 6:30 p.m. CT

Group Claims
PO Box 82520
Lincoln, NE 68501

Email: group@ameritas.com

To submit a new claim or pretreatment estimate:

When it comes time to use your benefits, filing claims is easy. If you see a network dentist, the provider will file the claim for you.

If you see an out-of-network provider, filing claims is still easy. Simply complete the top portion of the claim form with your name and contact information, then attach the bill or summary of services from the dentist. Some dentists provide a generic claim form, which is also accepted. Claims may be submitted via the fax number or mailing address listed below.

Fax: 402-467-7336

Mail:
Group Claims
PO Box 82520
Lincoln, NE 68501

Payor ID for electronic claims: 47009

To review specific member dental benefits, claims history, or a claim's status:

Visit your online benefit center at www.ameritas.com/group/olbc/DuncanAviation and follow the Secure Member Log-in quick link.

The secure member portal gives instant access to not only ID cards, but also plan benefits, certificate of coverage, claims information and remaining benefits. You can use the online member account to access forms and read frequently asked questions.