

USA+ Dental



Plans for Individuals and Families

United Service Association For Health Care
Founded 1983, Washington DC



Billing & Customer Service provided by:



DENTAL CARE

Benefits

You receive the following benefits: \$70 Annual Deductible for all services and the annual maximum is \$2,500. Benefits Are Paid Based On a Percentage of Usual and Customary Charges, No waiting period on preventive and basic services, Choose any dentist nationwide or select from one of nearly **65,000 provider access locations**.

Member Only - \$69.00

Member + 1 - \$99.00

Family - \$139.00

Benefits are payable as follows:

	Year 1 Incentive Coinsurance (First Benefit Period)*	Year 2 Incentive Coinsurance (Second Benefit Period & Forward)*
Type 1 Cleanings, Exams, Sealants, Fluoride	80%	100%
Type 2 Limited Oral Evaluation, All X-rays, Palliative Treatment	60%	100%
Type 3 Endodontics, All Periodontics, Major Restorative, Anesthesia	10%	40%
Type 4 Fillings, Crown Repair & Denture Repair, Extractions	25%	75%

Incentive Coinsurance: All members will begin at the lowest coinsurance level. Members will advance to year two coinsurance level only if a claim is received in the first Benefit Period. If a claim is not received, members return to the lowest level of coinsurance. The first Benefit Period begins on the effective date of the membership and ends on December 31st of the same year. The second Benefit Period begins on January 1st of the following year.

Dental Rewards - Rewards insureds that care for their teeth and use only a portion of their annual maximum benefit in a year. With its increasing maximum feature, each insured member and dependent earns additional money toward his or her next year's annual maximum.

To get the maximum carryover for the next year, you must meet the following requirements:

1. Visit your Dentist between January 1st and December 31st.
2. Submit claim for payment prior to April 1st of the next year.
3. Total benefits paid for current year visits must be less than \$750.
 - *If you meet all 3 requirements you will have an additional \$400 available in Annual Maximum for the next year.*
 - *In future years if you have benefits paid of less than \$750, additional amounts of \$400 will be added to the carryover. However, the most you can accumulate in the maximum carryover is \$1,200.*
 - *Your annual maximum will be \$3,700 in four years if you continue to visit the dentist once each year!*

DENTAL ACCESS

Benefits

You receive the following benefits:

\$50 Deductible for Type 1 Preventive Services

\$100 Deductible for Type 2 Basic and Major Services.

Member Only - \$49.00

Member + 1 - \$59.00

Family - \$69.00

- No more than 3 deductibles per calendar year
- Maximum Benefit - \$2,500 annually Per Family Member
- Benefits Are Paid Based On Schedule of Eligible Expenses
- No waiting period on preventive and basic services
- Choose any dentist nationwide or select from one of nearly 65,000 provider access locations.
- **There is a 12 month Waiting Period for Major Services**

Dental Rewards - Rewards insureds that care for their teeth and use only a portion of their annual maximum benefit in a year. With its increasing maximum feature, each insured member and dependent earns additional money toward his or her next year's annual maximum.

To get the maximum carryover for the next year, you must meet the following requirements:

1. Visit your Dentist between January 1st and December 31st.
 2. Submit claim for payment prior to April 1st of the next year.
 3. Total benefits paid for current year visits must be less than \$500.
- *If you meet all 3 requirements you will have an additional \$250 available in Annual Maximum for the next year.*
 - *As long as you continue to visit the Dentist each year the \$250 will be available.*
 - *In future years if you have benefits paid of less than \$500, additional amounts of \$250 will be added to the carryover. However, the most you can accumulate in the maximum carryover is \$1,000.*
 - *Your annual maximum will be \$3,500 in four years if you continue to visit the dentist once each year!*

DENTAL-VISION PLUS

Benefits

You receive the following benefits:

NO Deductible for Type 1 Preventive Services,
\$50 Deductible for Type 2 Basic Services,
Maximum Benefit - \$2,500 annually Per Family
Member, Benefits Are Paid Based On Schedule of
Eligible Expenses, No waiting period on preventive
and basic services, Choose any dentist nationwide
or select from one of nearly 65,000 provider access locations.

Member Only - \$39.00

Member + 1 - \$49.00

Family - \$59.00

Dental Rewards - Rewards insureds that care for their teeth and use only a portion of their annual maximum benefit in a year. With its increasing maximum feature, each insured member and dependent earns additional money toward his or her next year's annual maximum.

To get the maximum carryover for the next year, you must meet the following requirements:

1. Visit your Dentist between January 1st and December 31st.
2. Submit claim for payment prior to April 1st of the next year.
3. Total benefits paid for current year visits must be less than \$500.
 - If you meet all 3 requirements you will have an additional \$250 available in Annual Maximum for the next year.
 - In future years if you have benefits paid of less than \$500, additional amounts of \$250 will be added to the carryover. However, the most you can accumulate in the maximum carryover is \$1,000.
 - Your annual maximum will be \$3,500 in four years if you continue to visit the dentist once each year!

This benefit is provided to USA+ Members by a group Dental Expense policy issued to USA/HC by Ameritas Life Insurance Company. Certain terms and conditions apply and benefits are subject to the Exclusions and Limitations. A complete description is contained in the Certificate of Coverage.

Ameritas Group, a division of Ameritas Life Insurance Corp. a UNIFI Company, offers group dental and eye care products nationwide. Ameritas Group's dental and eye care products (9000 Ed. 01-05) are issued by Ameritas Life.

BENEFITS

SERVICE	DENTAL CARE	DENTAL ACCESS	DENTAL VISION PLUS
Benefits paid based on Ameritas Schedule of Eligible Expenses	NO	Yes- See Class Number 3 Schedule	YES - See Class Number 4 Schedule
Pays based on % of Usual and Customary Charges	YES	NO	NO
Maximum Benefit Amount	\$2,500	\$2,500	\$2,500
Major Services Covered	YES	Yes, with 12 month waiting period	NO
Deductible Amounts for Preventative services	\$70 annual for all services	\$50	NONE
Deductible Amounts for Basic services	\$70 annual for all services	\$100	\$50
Deductible Amounts for Major services	\$70 annual for all services	\$100	NO
Benefits paid based on Yr.1 Incentive Coinsurance and Yr.2 Incentive Coinsurance	YES	NO	NO
Required to use an Ameritas Participating Provider	NO	NO	NO
Can choose any Dentist Nationwide	YES	YES	YES
	Based on Benefit Periods; 1st=Membership Effective date through 12/31 of that same year; 2nd and subsequent benefit periods 1/1 through 12/31 each year	Calendar year 01/01/ to 12/31	Calendar year 01/01/ to 12/31
Benefits are based on a Benefit Period/Calendar Year			
Missing Tooth Clause	YES	YES	YES
Orthodontic Treatment	NO	NO	NO
Increased Dental Maximum Carryover Benefit Amount	\$1,200 Includes PPO Carry Over	\$1,000	\$1,000
Member has a 30 day evaluation period to request a full refund	YES	YES	YES
Free Eye Exam At VSP Providers	YES	YES	YES
Maximum Payable for the vision exam if a non participating provider	Up to \$47	Up to \$47	Up to \$47
Discount on lenses, frames and hardware at a participating provider	Yes, up to 20% discount	Yes, up to 20% discount	Yes, up to 20% discount
Laser Surgery Participating Provider	Yes, up to 25% discount on laser surgery	Yes, up to 25% discount on laser surgery	Yes, up to 25% discount on laser surgery
Lasik Benefits	NO	Lifetime Maximum Benefit per Eye, 1st Benefit Period \$0 per eye, 2nd Benefit Period \$100 per eye, 3rd Benefit Period \$250 per eye, 4th + Benefit Period \$500 per eye	NO
Age Limit	NO	NO	NO
Dependent Maximum Age	Children less than age 26	Children less than age 26	Children less than age 26
Notice of Claim	30 days	30 days	30 days
Proof of Loss (time to file a claim)	90 days	90 days	90 days
Time Frame to file first claim to move to 2nd yr. Coinsurance level	Within 1st Benefit Period	NO	NO
Monthly Dues - Individual	\$69	\$49	\$39
Monthly Dues - Member + 1 dependent	\$99	\$59	\$49
Monthly Dues - Member + 2 or more dependents	\$139	\$69	\$59

Vision Benefits*

You receive the following benefits and more: Free eye exam once per year per family member from participating providers; 20% discount on lenses, frames, and other hardware; Up to a 25% discount on laser surgery; There are 32,000 VSP providers nationwide; There's a VSP provider within ten miles of the homes of 90% of the United States population; Find a VSP provider near you at ameritasgroup.com.

* These benefits are provided to USA+ Members by a group Dental Expense policy issued to USA/HC by Ameritas Life Insurance Corp. Certain terms and conditions apply and benefits are subject to the Exclusions and Limitations. A complete description is contained in the Certificate of Coverage. Ameritas Group, a division of Ameritas Life Insurance Corp. a UNIFI Company, offers group dental and eye care products nationwide. Ameritas Group's dental and eye care products (9000 Ed. 01-05) are issued by Ameritas Life.

The USA+ membership is not an insurance contract. The membership includes insured & non-insured benefits. This is an Association Membership offered and administered by United Service Association For Health Care, P.O. Box 200905, Arlington, TX 76006-0905, 800-USA-1187. Not available in all states. Please contact USA+ for state availability.

You have 30 days from the date you receive your membership materials (or such longer period as may be required by state law) to review and evaluate the USA+ membership. If you wish to cancel your membership and receive a full refund, you may do so by submitting a written request to USA+ at the address listed below.

NON-INSURED BENEFITS

MyHealthCompass™

The most comprehensive consumer health information tool available. With MyHealthCompass™, you will have access to detailed information about healthcare providers, and be better equipped to make healthcare decisions. As a member of MyHealthCompass™, you'll benefit from: Quality ratings for hospitals and medical procedures, Pricing information for medical procedures, Detailed profiles on doctors and hospitals.

USA+ Benefits Protector

Many individuals lose their job due to a company re-location, company downsizing or as the result of natural disasters. For most individuals, loss of employment also means a monetary loss.

The Benefits Protector program helps cushion the impact of economic downturns that occur. Should you lose your job through no fault of your own, we will be there for you. Your membership dues will be waived and your membership benefits will continue for three (3) months.

(Certain Terms and Conditions Apply).

USA+ Scholarship Program

USA+ will award five (5) scholarships each academic school year. The scholarships are payable at \$1,250 per semester and \$2,500 per school year, for a total of four semesters (Fall and Spring) and a total award of \$5,000. The award is only applicable to students whose degree program is in a medical related field.

The recipient must be a full time student (minimum of 12 hours per semester). The selection criteria that will be used will include the following:

- Academic achievement, including grades, rank in class, standardized test scores and achievement test scores. Student must have a minimum GPA of 3.0
- Community/extracurricular involvement
- Leadership
- Participation in specific activities
- Awards and recognition
- Work history
- Personal or family attributes
- Field of Study: Must be health care related, such as: Nursing, Radiology, School of Medicine, Nuclear Medicine, etc.

More information is provided in benefit guide.



The USA+ Foundation was created over twenty years ago to help fund charities that assist those who suffer needlessly, giving them hope for the future.

The USA+ Foundation receives its funding from USA+ membership dues. Each month, a portion of the dues received from each member is donated to the USA+ Foundation.

We are proud to announce that the USA+ Foundation has awarded over 7 million dollars to worthwhile charities, community programs, and national research programs.

The following are organizations that have received grants from the USA+ Foundation to help improve the quality of life for those facing unexpected challenges:

- American Diabetes Association
- American Red Cross
- Arlington Museum of Art/Arlington ISD Art Education
- Athletes in Action
- Boomer Esiason Foundation
- Boys & Girls Club of Greater Dallas – Grand Prairie Chapter
- Character Counts Coalition
- Cook Children’s Hospital
- Cystic Fibrosis Foundation
- Dallas Stars Foundation
- Habitat for Humanity
- Juvenile Diabetes Research Foundation
- March of Dimes
- Muscular Dystrophy Association
- Reaching America’s Youth Ministries
- Salvation Army
- St. Jude Children’s Research Hospital
- Texas Rangers Baseball Foundation
- United Cerebral Palsy
- United Way of Metropolitan Dallas
- Waco ISD Education Foundation
- Watson Children’s Shelter
- Women’s Business Support Network
- YMCA

The USA+ membership is not an insurance contract.