Cal NECA Health Plan

Dental Highlight Sheet

Annual Open Enrollment



Dental Plan Summary Effective Date: 1/1/2025

Plan Benefit	
Type 1	100%
Type 2	80%
Type 3	50%
Deductible	\$50/Calendar Year Type 2 & 3
	Waived Type 1
	\$150/family
Maximum (per person)	\$2,500 per calendar year
Allowance	90th U&C
Waiting Period	None

Orthodontia Summary - Adult and Child Coverage

Allowance	U&C
Plan Benefit	80%
Lifetime Maximum (per person)	\$2,500
Waiting Period	None

Included

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

Type 1	Type 2	Type 3
Routine Exam	 Sealants (age 13 and unde 	r) • Onlays
(2 per benefit period)	 Space Maintainers 	• Crowns
Bitewing X-rays	 Fillings for Cavities 	(1 in 5 years per tooth)
(2 per benefit period)	Restorative Composites	Crown Repair
Full Mouth/Panoramic X-rays	(anterior and posterior teetl	h) • Prosthodontics (fixed bridge; removable
(1 in 5 years)	 Endodontics (nonsurgical) 	complete/partial dentures)
Periapical X-rays	 Endodontics (surgical) 	(1 in 5 years)
Cleaning	 Periodontics (nonsurgical) 	
(2 per benefit period)	 Periodontics (surgical) 	
Fluoride for Children 18 and under	Denture Repair	
(2 per benefit period)	Simple Extractions	
	Complex Extractions	
	 Anesthesia 	

Ameritas Information

We're Here to Help

This plan was designed specifically for the associates of Cal NECA Health Plan. 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 7 a.m. to midnight (Central Time) Monday through Thursday, and 7 a.m. to 6:30 p.m. on Friday. You can speak to them by calling toll-free: 800-487-5553. For plan information any time, access our automated voice response system or go online to ameritas.com.

Dental Network Information

To find a provider, visit ameritas.com and select **FIND A PROVIDER**, then **DENTAL**. Enter your criteria to search by location or for a specific dentist or practice. California Residents: When prompted to select your network, choose the Ameritas Network found on your ID Card or contact Customer Connections at 800-487-5553.

Your provider network is Ameritas Classic and Plus Network.

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.