

Solvay School  
*FUSION Highlight Sheet*  
*Teachers & Administration*



**FUSION: THE ULTIMATE CHOICE<sup>SM</sup>** combines dental and eye care benefits in one easy-to-administer plan. This plan combines the annual maximum between the dental and eye care plans.

For the maximum:

- The member can use up to \$1,000 toward any covered dental expense.
- The member can use up to \$150 towards any covered eye care expense.
- Total benefits paid between the two coverages will not exceed \$1,000.

**Dental Plan Summary** *subject to FUSION plan design listed above*

<b>Coinsurance</b>	
Type 1	100%
Type 2	85%
Type 3	50%
<b>Deductible</b>	\$0/Calendar Year Waived Type 1
<b>Maximum (per person)</b>	No Family Maximum \$1,000 per calendar year
<b>Allowance</b>	SMART
<b>Waiting Period</b>	None
<b>Annual Eye Exam</b>	None
<b>LASIK Advantage®</b>	None

**Orthodontia Summary - Child Only Coverage**

<b>Allowance</b>	U&C
<b>Coinsurance</b>	50%
<b>Lifetime Maximum (per person)</b>	\$1,500
<b>Waiting Period</b>	None

**Eye Care Summary** *subject to FUSION plan design listed above*

<b>Maximum</b>	\$150
<b>Deductible</b>	None
<b>Frequency</b>	None

**Dental Procedure Summary**

Type 1	Type 2	Type 3
<ul style="list-style-type: none"> <li>• Routine Exam (2 per benefit period)</li> <li>• Bitewing X-rays (2 per benefit period)</li> <li>• Full Mouth/Panoramic X-rays (1 in 3 years)</li> <li>• Periapical X-rays</li> <li>• Cleaning (2 per benefit period)</li> <li>• Fluoride for Children 18 and under (1 per benefit period)</li> <li>• Sealants (age 16 and under)</li> <li>• Space Maintainers</li> </ul>	<ul style="list-style-type: none"> <li>• Restorative Amalgams</li> <li>• Restorative Composites</li> <li>• Endodontics (nonsurgical)</li> <li>• Endodontics (surgical)</li> <li>• Periodontics (nonsurgical)</li> <li>• Periodontics (surgical)</li> <li>• Denture Repair</li> <li>• Simple Extractions</li> <li>• Complex Extractions</li> <li>• Anesthesia</li> </ul>	<ul style="list-style-type: none"> <li>• Onlays</li> <li>• Crowns (1 in 5 years per tooth)</li> <li>• Crown Repair</li> <li>• Prosthodontics (fixed bridge; removable complete/partial dentures) (1 in 5 years)</li> </ul>

*Current Dental Terminology* © American Dental Association.

**Ameritas of New York Information**

**We're Here to Help**  
 This plan was designed specifically for the associates of Solvay School. At Ameritas of New York, 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: 800-659-5556. For plan information any time, access our automated voice response system or go online to [newyork.ameritasgroup.com/member](http://newyork.ameritasgroup.com/member).

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**Rx Savings**

Our valued plan members and their covered dependents (even their pets) can save on prescription medications through any Walmart or Sam's Club pharmacy across the nation. This Rx discount is offered at no additional cost, and it is not insurance.

To receive the Walmart Rx discount, Ameritas of New York plan members just need to visit us at [newyork.ameritasgroup.com](http://newyork.ameritasgroup.com) and sign into (or create) a secure member account where they can access and print an online-only Rx discount savings ID card.

**Eyewear Savings**

Ameritas of New York plan members may receive up to 15% off eyewear frames and lenses purchased at any Walmart Vision Center nationwide. Members may also bring in their current vision prescription from any vision care provider and purchase eyewear at Walmart. This savings arrangement is not insurance: it is available to members at no additional cost to their plan premium.

To receive the eyewear savings identification card, Ameritas of New York plan members can visit [newyork.ameritasgroup.com](http://newyork.ameritasgroup.com) and sign-in (or create) a secure member account. Members must present the Ameritas Eyewear Savings Card at time of purchase to receive the discount.

**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.

**Late Entrant Provision**

We strongly encourage you to sign up for coverage when you are initially eligible. If you choose not to sign up during this initial enrollment period, you will become a late entrant. Late entrants will be eligible for only exams, cleanings, and fluoride applications for the first 12 months they are covered.

**This document is a highlight of plan benefits provided by Ameritas Life Insurance Corp. of New York 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, contact your benefits administrator.**