Your Smile is About to Get a Whole Lot Brighter

Take a Look at the Advantages You’ll Get with the TRTA Dental Plan

You want a healthy smile, but the financial burden of dental expenses keeps getting heavier on everyone’s budget. So many plans don’t let you choose your own dentist, and many have long waiting periods before you get coverage. Here’s the good news: we’ve fixed all of that.

GET THESE ADVANTAGES:

• The Dentist You Want – You get to choose the provider you like best. You are not required to stay inside a specific network.

• Save 20-40% – If you pick a dentist within the Ameritas Dental Network. Find your provider at www.findproviders.net or call Ameritas at 888-239-3336.

• No Waiting Periods – You get your benefits with no waiting periods for covered services – when you enroll during open enrollment.

• Access Providers Nationwide – Whether you are at home or traveling the U.S., the Ameritas Dental Network has over 400,000 providers to serve your needs.

• Routine Cleanings and Oral Exams – Covered twice per calendar year with no deductible.

• Covered Procedures – For fillings, crowns, x-rays, anesthesia, oral surgery, perio-cleanings, root canals, dentures, and all other Type 2 and 3 procedures shown in the Dental Plan Highlights below. Your deductible is only $75 per calendar year per person.

• High Calendar Year Maximum – Yours is $1,500. With Dental Rewards® you can carry over a portion of your unused maximum to the next benefit period, up to a maximum of $2,750.

• Guaranteed Rates – All the way through July 2020.

### Dental Plan Highlights

<table>
<thead>
<tr>
<th>Type 1 Services: 100% coverage for*</th>
<th>Type 2 Services: 80% coverage for*</th>
<th>Type 3 Services: 50% coverage for*</th>
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<tbody>
<tr>
<td>Routine Oral Exams</td>
<td>X-rays</td>
<td>Endodontics (root canals)</td>
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<tr>
<td>Routine Cleanings</td>
<td>Crown - Stainless Steel</td>
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<td></td>
<td>Crown Repair</td>
<td>Crowns (Porcelain) and Dentures</td>
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<td></td>
<td>Fillings</td>
<td>Oral Surgery</td>
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<td>General Anesthesia</td>
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### Monthly Rates

- Member Only: $53.76
- Member & Spouse or Dependent: $107.52
- Member & Family: $135.42

*Reimbursement percentages are based on the maximum plan allowance charges for services in your geographical area. All services are subject to limitations and exclusions. The master policy is governed by the laws of the state of Texas.

This information is provided by Ameritas Life Insurance Corp. (Ameritas Life). Group dental, vision and hearing care products (9000 Rev. 07-16, dates may vary by state) and individual dental and vision products (Indiv. 9000 Rev. 07-16, dates may vary by state) are issued by Ameritas Life. Some plan designs are not available in all areas. In Texas, our dental network and plans are referred to as the Ameritas Dental Network. Some states require that producers be appointed with Ameritas Life before soliciting its products. To become appointed with Ameritas Life, please call 800-659-2223.

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Your Vision and Your Good Health

Your eye health is essential to your happiness and well-being. That’s why we ensure you can count on your TRTA Vision Plan for superior coverage at affordable rates.

This plan emphasizes eye health by featuring experienced, independent private practice eye doctors and contracted retail chains.

Just look at all your plan entitles you to:

**Nationwide Choice Network of Experienced Doctors** – Most of our members live within 10 miles of the doctor they choose. That’s because we have thousands of doctors located in rural and metropolitan areas throughout the United States. You can even visit your local Walmart for all your vision needs!

**One-Stop Convenience** – Our network of doctors provides eye exams and eyewear to take care of all your vision needs. You can find a VSP doctor by visiting trta.vspforme.com or call 800-877-7195.

**Low Monthly Rates** –
- Member Only: $11.94
- Member & Spouse or Dependent: $20.94
- Member & Family: $26.05

**Great Benefits and Low Copays** – For the services you need, including:

- **WellVision Exam**: (Covered once every 12 months) $15 copay
- **Prescription Eyeglasses**: $25 copay
  - Frames: (Covered up to your allowance once every 24 months)
    - $150 allowance for a wide selection of frames
    - $170 allowance for featured frame brands.
    - 20% savings on the amount over your allowance
- **Lenses**: (Covered up to your allowance once every 12 months)
  - Single vision, lined bifocal, and lined trifocal lenses
  - 100% coverage on Standard Progressive lenses
  - 20-25% saving on non-covered lens enhancements such as anti-reflective and UV coating
- **Contact Lens Exam**: (Covered once every 12 months instead of eyeglasses)
  When you choose contacts instead of glasses, your $150 allowance applies to the cost of your contacts and the lens exam (fitting and evaluation). This exam is in addition to your vision exam to ensure proper contact fit. If you choose contact lenses you will be eligible for a frame 12 months from the date the contact lenses were obtained.

**Extra Discounts and Savings** – You’ll get 20% savings on additional glasses and sunglasses.

Imagine how much you’ll save with your TRTA vision plan. Without a vision plan, the average exam and glasses typically cost over $450. But your member-only savings has you covered.

**Out-of-Network Reimbursement Amounts** – If the provider of your choice is outside the network, no problem. Here are the reimbursement amounts you can expect:

- Exam: up to $45
- Frame: up to $70
- Single Vision Lenses: up to $30
- Lined Bifocal Lenses: up to $50
- Lined Trifocal Lenses: up to $65
- Progressive Lenses: up to $50
- Contacts: up to $105

Let Us Help You Pay for the Care That is So Vital to Your Good Health.

Join Us to Get Your TRTA Member-Only Vision Plan Benefits Today!

VSP guarantees service from VSP network doctors only. In the event of a conflict between this information and your organization’s contract with VSP, the terms of the contract will prevail. 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.