



DENTAL • VISION • LIFE • DISABILITY

Thompson Technologies, Inc.
Effective Date: September 1, 2016

Dental Benefit Highlights:

Diagnostic & Preventative	PPO dentist	Non-participating dentist
Diagnostic and preventive services- includes exams, cleanings, fluoride and space maintainers	100%	100%
Sealants- to prevent decay of permanent molars	100%	100%
Brush Biopsy- to detect oral cancer	100%	100%
Radiographs- x-rays	100%	100%
Basic Services		
Emergency palliative treatment- to temporarily relieve pain	80%	80%
Periodontal Maintenance – cleanings by specialist	80%	80%
Oral Surgery Services-extractions and dental surgery	80%	80%
Minor restorative services- fillings	80%	80%
Other Basic Services- misc. services	80%	80%
Major Services		
All Other Periodontics services- to treat gum disease	50%	40%
Endodontic Services- root canals	50%	40%
Major restorative services- crowns and veneers	50%	40%
Relines and repairs- to bridges and dentures	50%	40%
Prosthetic services- bridges, implants and dentures	50%	40%
Maximum Payment & Deductible		
Calendar Year Maximum payment- applies to Diagnostic & Preventive, Basic & Major services	\$1,500	
Deductible- Individual per Calendar Year	\$50	\$100
Deductible- Family per Calendar Year	\$150	\$300
Allowed Amount -	PPO Fee	90th Percentile
Orthodontics	No Coverage	
Orthodontic Services-braces	50%	50%
Orthodontic Lifetime Benefit Limit	\$1,500	\$1,500
Orthodontic Age Limit	99	99

Find A Dentist: You can visit any dentist, however you may get the most benefit from your plan by visiting a dentist that participates with Renaissance and our network partners. When contacting a dental office, refer to the following partner networks to make access to a participating dentist even easier:

- Maverest
- Maximum Care
- Connection Dental
- Preferred (formerly Dental Wellness Partners)
- Stratose

You can also find a participating network participating dentist at www.renaissancedental.com/findadentist.



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Dental Benefits Made Easy:

Our online resources provide secure access for enrollees 24/7, giving them the safety and convenience to find a participating dentist, check benefits, review Explanation of Benefits (EOBs), print ID cards and more.

Why Dental?

Oral health and overall health are connected, and dentists are in a unique position to detect more than 120 signs and symptoms of non-dental diseases, including diabetes and heart disease, through patient examination.

Save with Renaissance Dental

The example below outlines how much you can save when you combine great dental benefits with our nationwide network:

	Submitted fee	Maximum approved fee		Coverage level		Amount Renaissance pays	Amount you pay
In-network dentist	\$950.00	\$744.00	x	50%	=	\$372.00	\$372.00

Set by our provider contract
61% decrease from the dentist's submitted fee

Additional plan information

- **Children under age 26** are eligible for benefits, including children who are married, who do not live with the subscriber, who are not dependents for Federal income tax purposes, and/who are not permanently disabled.
- **Waiting Period: NONE**
- **Maximum Payment:** Per person total per calendar year on Basic Services and Major Services. Plan payment will not exceed the higher amount shown in any benefit period or lifetime.
- **Maximum Carryover:** If at least one covered service is paid in a calendar year and the total benefit paid does not exceed \$750 in that calendar year, \$375 will be added to the next calendar year carryover maximum. This amount will accumulate from one calendar year to the next, but will not exceed \$1,500.
- **Deductible:**
 - Per person total per calendar year limited to a maxim family deductible per calendar year.
 - The deductible does not apply to Diagnostic & Preventative Services.

The plan specifications are subject to the following exclusions and limitations:

- No pre-existing condition exclusions or limitations.
- Oral exams are payable twice per calendar year.
- Prophylaxes (cleanings) are payable twice per calendar year.
- Fluoride treatments (up to age 19) are payable twice per calendar year.
- People with at-risk health conditions may be eligible for additional prophylaxes (cleanings) or fluoride treatments. The patient should talk with his or her dentist about treatment.
- Bitewing X-rays are payable once per calendar year and full mouth X-rays are payable once in any five-year period.
- Sealants are payable only for the occlusal surface of first and second permanent molars, to age 16. The surface must be free from decay and restorations. Sealants are payable once per tooth per 3 year period.
- Crowns, veneers, bridges and dentures are payable once per tooth per five-year period.
- Implants are payable once per lifetime.
- **Questions? Our dedicated call center representatives are ready to help at 888-358-9484.**

Adding Renaissance Vision coverage to your dental plan couldn't be easier. You may purchase our vision coverage as a standalone benefit or bundle dental and vision for easy administration.

Renaissance vision coverage is administered by VSP. With over 65 million members and more than 31,000 doctors, VSP boasts the largest national network of independent doctors.¹ Eye care professionals across the nation partner with VSP to deliver the best patient experience. You'll be thrilled by the large selection of eyewear available to you, from classic styles to trendy frames, and you'll find hundreds of options to choose from. Frames include dozens of top brand names, so you can find one that fits your personality.

Vision Coverage through VSP Eye Doctors

The best eye doctors provide the best care. VSP carefully chooses eye doctors based on their professional licensing, work history, education, professional liability and ethics. Vision members will receive quality care with an eye exam from a VSP doctor.

- **Certified care:** VSP optometrists are Therapeutic Pharmaceutical Agent (TPA) certified and ophthalmologists are American Board of Ophthalmology (ABO) certified.
- **Excellent standards:** The VSP credentialing process complies with the National Committee for Quality Assurance (NCQA) standards.

All VSP Doctor Locations

Accept new patients, provide a WellVision Exam and offer a wide selection of contact lenses and frame brands.

VSP Doctor Network: VSP Choice

Your Coverage with VSP Doctors and Affiliate Providers	Plan Type - B	
	Copay	Frequency
WellVision Exam <ul style="list-style-type: none"> • Focuses on your eyes and overall wellness 	\$10	Every 12 months
Prescription Glasses	\$25	See frame and lenses
Frame <ul style="list-style-type: none"> • \$150 allowance for a wide selection of frames • 20% savings on the amount over your allowance 	Included in prescription glasses	Every 24 months
Lenses <ul style="list-style-type: none"> • Single vision, lined bifocal and lined trifocal lenses • Polycarbonate lenses for dependent children 	Included in prescription glasses	Every 12 months
Lens Enhancements <ul style="list-style-type: none"> • Standard progressive lenses • Premium progressive lenses • Custom progressive lenses • Average savings of 20%–25% on other lens enhancements 	\$55 \$95–\$105 \$150–175	Every 12 months
Contacts (instead of glasses) <ul style="list-style-type: none"> • \$150 allowance for contacts; copay does not apply • Contact lens exam (evaluation and fitting) 	Up to \$60 (applies to contact evaluation and fitting)	Every 12 months
Extra Savings <ul style="list-style-type: none"> Glasses and Sunglasses <ul style="list-style-type: none"> • 20% savings on additional glasses and sunglasses, including lens enhancements, from any VSP doctor within 12 months of your WellVision Exam. Contacts <ul style="list-style-type: none"> • 15% savings on a contact lens exam (fitting and evaluation) Laser Vision Correction <ul style="list-style-type: none"> • Average 15% off the regular price or 5% off the promotional price; discounts only available from contracted facilities. 		
Your Coverage with Other Providers ²		
Visit www.vsp.com for details, if you plan to see a provider other than a VSP doctor.		
<ul style="list-style-type: none"> • Exam—Up to \$45 • Frame—Up to \$70 	<ul style="list-style-type: none"> • Single vision lenses—Up to \$30 • Lined bifocal lenses—Up to \$50 	<ul style="list-style-type: none"> • Lined trifocal lenses—Up to \$65 • Progressive lenses—Up to \$50 • Contacts—Up to \$105 • Lenticular Lenses—up to \$100

(1) VSP internal data. (2) Coverage with a retail chain affiliate may be different. Once your benefit is effective, visit www.myrenbenefits.com for details. Coverage information is subject to change. In the event of a conflict between this information and your organization's contract with Renaissance, the terms of the contract will prevail. Based on applicable laws, benefits may vary by location.

Underwritten by Renaissance Life & Health Insurance Company of America, Indianapolis, IN, and in New York by Renaissance Health Insurance Company of New York, NY. Both companies may be reached at PO Box 1596, Indianapolis, IN 46206.