

Oral health is important to overall health. A BrightBenefits dental plan gives you coverage on general preventive care, as well as basic and major services – because that's what you need to keep up your...

## BrightSmile

Welcome to BrightBenefits!

BrightBenefits™



### Create an online account

Visit **BrightBenefits.com** to register your account. Once logged in, you'll be able to review a summary of plan benefits, view and print ID cards, and find a network dentist.



### Stay in-network to save

Save 20-45% by visiting an in-network dentist. With over 283,000<sup>1</sup> practicing locations, there's a good chance your dentist is already in the network. Find a participating location at **BrightBenefits.com**.



### No ID card needed

You don't need an ID card to visit the dentist – just your name, birthdate and member ID number (or social security number). If you do want an ID card, you can view and print them from your account at **BrightBenefits.com**. Family members on your plan will need to provide *your* information, as the policyholder.



### We're here to help

If anyone on your plan has questions about how to access their dental benefits, just visit **BrightBenefits.com/contact** or call us at **(866) 998-3944** Monday–Friday, 10 a.m. – 7:30 p.m. CST.

**MAXIMUM**  
**CARE** **PLUS**  
plus Connection Dental Network®

1. Represents locations in the Maximum Care Plus Connection Dental Network® as of Jan. 2021. Network provided by Careington International Corporation. Policy underwritten by National Guardian Life Insurance Company. National Guardian Life Insurance Company is not affiliated with the Guardian Life Insurance Company of America, a/k/a The Guardian or Guardian Life. Policy form number NDNGRP 2020 or NDNGRP 2010. OEBS20

# BrightSmile Dental plan

Red River Parish Public Schools

	In-Network	Out-of-Network
Annual Maximum	\$2,000	\$2,000
Deductible	\$50 Annual	\$50 Annual
Deductible Limit	Max 3 per family	Max 3 per family
<b>Preventive Services</b>		
Cleanings (3 per year)	Plan Pays	Plan Pays
Exams	100 %	100 %
Fluoride (under age 16)		
Emergency Pain	Deductible Waived	Deductible Waived
Oral Cancer Screening (age 40+)	Waiting Period: 0 months	Waiting Period: 0 months
Radiographs - Bitewings		
<b>Basic Services</b>		
Sealants (under age 16)	Plan Pays	Plan Pays
Radiographs - FMX	80 %	80 %
Restorations (Amalgams & Anterior Resin)		
Restorations (Posterior Resin)	Waiting Period: 0 months	Waiting Period: 0 months
<b>Major Services</b>		
Space Maintainers (under age 16)		
Simple Extractions		
Surgical Extractions		
Oral Surgery		
Endodontics		
Periodontal Maintenance		
Non-Surgical Periodontics		
Surgical Periodontics	Plan Pays	Plan Pays
Inlays	50 %	50 %
Onlays		
Crowns	Waiting Period: 0 months	Waiting Period: 0 months
Crown Repairs		
Bridges		
Bridge Repairs		
Dentures		
Denture Repairs		
Implants		
Anesthesia		
<b>Orthodontics</b>	50%	50%
Child only	Waiting Period: 12 months	Waiting Period: 12 months
<b>Orthodontics Lifetime Maximum</b>	\$1,000	\$1,000

## Extra member savings (not insured benefits)

Complimentary Everplans subscription (worth \$75/yr.) to organize life's most important details, so they're safe and easy to get to in an emergency.

15% off standard laser vision correction or 5% off promotional prices at LasikPlus® locations nationwide.

Save over 40% on premium hearing aids through Your Hearing Network, plus other offers and promotions\*

BrightBenefits dental plans are offered in association with Maximum Care PPO plus Connection Dental Network®. Maximum Care PPO dentists accept new patients. In-network services are paid off the PPO fee schedule. Out-of-network services are based on the 90th R&C percentile of reasonable and customary fees. Maximum Roll Forward: One cleaning with a maximum of up to \$500 in claims spend, toward a \$1,000 allowance, annually allows for a rollover of \$250 annually with a cumulative rollover maximum no greater than \$2,000 total allowance (i.e. \$1,000 annual allowance plus year 1 rollover of \$250 equals \$1,250 allowance year 2; if criteria noted is met, total allowance in year 3 with rollover would be \$1,500, which can go no higher than \$2,000 cumulatively). This plan may have waiting periods for new enrollees. Employees with active coverage on a prior plan will be exempt from all waiting periods. The information on this sheet is a brief summary of your dental plan and the services it covers. There are some limitations on the expenses for which your dental plan pays. If you have specific questions regarding benefit coverage, limitations, exclusions, or non-covered services, please refer to your certificate of coverage/dental benefit booklet or contact BrightBenefits. \*Over 40% off pricing as referenced in the Consumer Guide to Hearing Aids. Discount varies depending on product. This offer is only good at participating Your Hearing Network provider locations and cannot be combined with any other offer or discount.