

Today... and ...



in the **Future**

Fort Smith Public Schools

3205 Jenny Lind • P.O. Box 1948
Fort Smith, Arkansas 72902-1948
479-785-2501
Fax: 479-784-8108

DENTAL INSURANCE RATES

2012

	Monthly Cost To Employee
Employee	\$ 0.00
Employee/Spouse	\$32.19
Employee/Child(ren)	\$26.37
Employee/Family	\$67.63

Blue Cross Blue Shield is the carrier for the district's dental plan. The district provides dental insurance for eligible employees at no extra expense to you. You may elect to cover your eligible dependents by paying the required premium through payroll deduction.

New eligible employees to the district may elect to cover their existing dependents at the time they complete the insurance application forms. If dependents are not covered at this time, they may only be enrolled during a future open enrollment. Applications for dependent coverage filed at a later date will not be accepted until a future open enrollment or unless a qualifying event changes the employee's status. **This is an open enrollment year.** The next open enrollment will be October 2013. Children under the age of three (3) may be added in the year that they turn three (3) on the regular enrollment date, even though no open enrollment occurs.

A - Diagnostic & Preventive Services:

Routine Periodic Exams X-Rays
Fluoride Treatment Prophylaxis (Cleaning)
Sealants

100%
(no deductible)

B - Basic Services:

Fillings Endodontics (Root Canals)
Simple Extractions Nonsurgical Periodontics (Gum Treatment)
Oral Surgery (Surgical Extractions)

80%
(after deductible)

C - Major Services:

Inlays, Onlays, Crowns & Bridges
Dentures, Full or Partial Surgical Periodontics

50%
(after deductible)

D - Orthodontic Services:

Diagnostic, Active, Retention Treatment
Eligible Dependent Children Under Age 19

50%
(after deductible)
\$ 1,000 Lifetime Max

Deductibles & Annual Maximum:

\$50 Per Calendar Year Deductible Per Member – Waived on Diagnostic & Preventive Services
\$1,500 Per Calendar Year Maximum Per Member

