# Advantage

The Allied Association brings benefits and services to individuals – allowing them to save money and make life easier





## **Renaissance Dental**

#### Dental insurance for every age

Good dental care is essential to maintaining a healthy lifestyle. Choose from three plan designs for the coverage that best suits your needs — Bright, Shine or Radiate.

### **Benefits include**

- Coverage for fillings, simple extractions, other x-rays, sealants and denture repair
- Coverage for major work, including endo, perio, dentures, implants, crowns, bridges and oral surgery
- No waiting periods on diagnostic and preventive services





Collectively, the Renaissance Health Service Corporation covers more than 13.1 million people and pays out \$3 billion in claims annually\*. Allied National, a 90 Degree Benefits Company, along with the Allied Association, is working with trusted brands to provide individuals with affordable benefits. \*Renaissance Internal Data.

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## **Renaissance Dental**

Renaissance Dental Active Lifestyles Insurance plans has three plan designs so consumers can choose the coverage that suits their needs — Bright, Shine or Radiate.

#### Renaissance Dental Plan Benefits include:

- No waiting periods on diagnostic and preventive services.
- **Widespread access to care:** Renaissance combines national and regional networks to provide over 400,000 dental access points for maximum choice and value. While individuals may save the most money by visiting a dentist in its vast network, they are welcome to visit any licensed dentist in the country. You can find a dentist at *MyRenProviders.com*.
- **Excellent customer service:** Our dedicated customer service representatives are available to address any questions.
- Online assistance: Renaissance members have access to our online portals that allow them to easily manage their benefits information. Individuals can find a participating dentist, check benefits and amounts used toward maximums or deductibles, print ID cards and more.
- Plan option available with **no deductible**.
- **Annual maximums** up to \$2,000 per person available.

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This is an invitation to inquire about the Renaissance Dental Plan. This is a limited description of the plan. See the Enhanced Association Benefits information for complete details.



	PLAN OPTIONS					
	Bright Essentials – MAC	Shine High Plan – MAC	Radiate Graduated Plan – MAC Year 1/Year 2/Year 3			
	In-Network Out-of-Network	In-Network Out-of-Network	In-Network Out-of-Network			
Annual Deductible Per Person/Per Family	0	50/150	50/150			
Deductible Waived Preventive & Diagnostic	N/A	Yes	Yes			
Annual Max	1,000	2000	800/1000/1200			

#### **Preventive & Diagnostic**

	Exams, Prophy Bitewing, Fluoride (child), Space Maintainers, Emer Palliative, Brush Biopsy	100%	100%	100%	80%	100%	100%
1	Brush Biopsy						

#### **Basic**

Waiting Period	6 months		6 months		None	
Fillings	50%	50%	80%	60%	25/35/50%	25/35/50%
Simple Extractions	50%	50%	80%	60%	25/35/50%	25/35/50%
Other X-rays	50%	50%	80%	60%	50/65/80%	50/65/80%
Sealants	Not Covered		80%	60%	50/65/80%	50/65/80%
Denture Repair	Not Covered		80%	60%	50/65/80%	50/65/80%

#### Major

Waiting Period	None	12 Months	None		
Endo, Perio, Dentures, Implants, Crowns, Bridges, Oral Surgery	Not Covered	50%	25/35/50%	25/35/50%	
Orthodontia	Not Covered	Not Covered	l '	i/50% adult & child	
Out-of-network Eligible Values	MAC	MAC	MAC		

In non-differential states (GA, MS, TX) Out-of-Network co-insurance values will match In—Network co-insurance values. Graduated Plan not available in Connecticut, Illinois, Montana, New Jersey, New York or Washington. Deductible waived for Preventive & Diagnostic Services, MAC = Out-of-Network paid at PPO fee schedule

#### Sign up for Coverage at RenaissanceBenefits.com/AlliedNational

Renaissance Internal Data

Products are underwritten by Renaissance Life & Health Insurance Company of America, Indianapolis, IN, and in New York by Renaissance Life & Health Insurance Company of New York, Binghamton, NY. Both companies can be reached at PO Box 1596, Indianapolis, IN 46206. Products may not be available in all states and jurisdictions.

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## **Exclusions/Limitations:**

Benefits are not payable with respect to any charge, service or event excluded as set forth below

- 1. Treatment by other than a dentist, except for services performed by a licensed dental hygienist or other licensed provider under the scope of his or her license as permitted by applicable state law.
- 2. Services, items or supplies excluded by our policies and procedures.
- 3. Services, items or supplies, as determined by us, which are not provided in accordance with accepted standards of dental practice.
- 4. Services, items or supplies received as a result of dental disease, defect, or injury due to an act of war, declared or undeclared.
- 5. Services, items or supplies that are generally covered under a hospital, surgical/medical, or prescription drug program.
- 6. Correction of congenital or developmental malformations, cosmetic surgery or dentistry for aesthetic reasons as determined by us.
- 7. Any appliance, restoration or surgical procedure used to: (a) change vertical dimension; (b) restore or maintain occlusion; (c) replace tooth structure lost as a result of abrasion, attrition, abfraction or erosion; and (d) splint or stabilize teeth for periodontal reasons.
- 8. Local anesthesia.
- 9. Gingivectomy as an aid to the placement of a restoration.

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