

VICKSBURG COMMUNITY SCHOOLS: ADMINISTRATION GROUP, G-806

Benefits are described and are subject to the terms and conditions set forth below.
All benefits are based on Usual and Customary charges.

SCHEDULE OF DENTAL BENEFITS

BENEFITS	LIMITS
<u>Benefit Percentage</u>	
Type I - Preventive Dental Services	100%
Type II - Minor Restorative Dental Services	100%
Type III - Major Restorative Dental Services	100%
Type IV - Orthodontic Services (for Dependent children under age 19 only)	100%
<u>Maximums</u>	
Maximum Benefit Paid Per Covered Person Per Calendar Year for Types I, II & III Dental Services	\$1,000
Lifetime Maximum Benefit Paid Per Dependent Child For Type IV Orthodontic Services	\$1,500

GENERAL INFORMATION

Questions about your dental coverage can be directed to your Dental Claims Analyst, **Heidi G.**, at ASR Health Benefits (**800-968-2449, ext. 3127**)

Many dental providers will file claims on your behalf directly with your benefits administrator. If your dental provider requires patients to file such claims themselves, you should obtain a claim form before going to the dentist.

Once you have obtained a dental claim form, fill in sections 1, 2, and 3 accurately and completely. Have the dentist fill out the bottom of the claim form or mail itemized copies of the bills with the claim form to ASR at P.O. Box 6392, Grand Rapids, MI 49516-6392. The bill should show the patient's full name, the date that services were rendered or purchases made, the type of care or supply received, and the cost per item.

Generally, the provider of service will be automatically reimbursed unless proof of prior payment is submitted when the claim is filed. Once a claim is processed, ASR will, acting on behalf of the Plan Administrator, send you an "Explanation of Benefits" that is issued to others on your behalf. The Plan Administrator reserves the right to pay the approved portion directly to you. Be sure to check for amounts that you may be responsible for paying.

Navigating ASR's Website

Typing www.asrhealthbenefits.com in your computer's internet browser will take you to ASR's Website, and you'll see various portals for Members, Employers, Providers, Agents, and Business Partners. Selecting "I'm a Member" will take you to the Member homepage. First-time users must click on "SIGN UP FOR A LOG-IN;" returning users should enter their Username and Password under "Member Log-In." If you have medical coverage through the West Michigan Health Insurance Pool (WMHIP), you may be directed to a screen that reads "Your login is associated with multiple employers. Please click a button below to specify which employer you wish to use." You should click on the red "Select" button for Group Number 806. The page that appears next is your gateway to, among many other things, obtaining a dental claim form. Position your mouse pointer over "RESOURCES" and a drop-down menu will appear. Slide the pointer to the "Forms" option, then slide it to the right so it's positioned over "General Forms," and click once. ASR's General Forms library will appear. The dental claim form is the second option from the top; click on "Download." Once the entire one-page form appears, print it using the appropriate command or icon on your computer screen.