SU	MMARY OF DENTAL BENEFITS
Valley Stream Teachers Association Welfare Benefit Trust	
Plan Administrator:	J.J. Stanis and Company, Inc.
Group Number:	4904
Benefit Year:	January 1 to December 31 (Calendar Year)
Dependent Children covered until:	to age 23 end of the month, no student status required
Waiting Period:	1st of the month following date of hire
Late Enrollment Penalty:	None - open enrollment period goes into effect 1/1 of each year.
Claims Filing Limit:	365 days
Deductibles:	\$20 Employee \$50 Day 1 - 4 (\$120 E - 1)
Plan Coinsurance Levels:	\$30 Employee, \$50 Dependents/\$120 Family
that Computation Devels.	In Network 200/ of Stonic Not Dive For Oat of Not at 200/ Day 11 0
Diagnostic/Preventative	In-Network - 80% of Stanis Net Plus Fee, Out of Network - 80% Reasonable &
Diagnostic/Tieventative	
Basic Services	In-Network - 80% of Stanis Net Plus Fee, Out of Network - 80% Reasonable & Customary
	In-network - 50% of Stanis Net Plus Fee, Out of Network - 50% Reasonable &
Major Services	
	In-network - 50% of Stanis Net Plus Fee, Out of Network - 50% Reasonable &
Orthodontic Services	Customary
Annual Maximum:	\$1,500 (calendar year)
Orthodontic Maximum:	\$2,000 lifetime maximum (not included in calendar year maximum)
PPO Network:	Yes- Stanis Net Plus
	1 Co Status (CC 1 Itas
	POLICY LIMITATIONS
See	plan booklet for full listing of policy limitations
Oral Exams ALL TYPES:	2 in a calendar
Prophylaxis:	2 in a calendar
Full mouth series OR panoramic film:	1 in 36 consecutive months
4 Bitewings:	2 in a calendar
Fluoride:	1 in 12 months, to age 18
Sealants:	Covered subject to medical necessity and review
	EVOLUCIONO
G.	EXCLUSIONS
Sec	e plan booklet for full listing of policy exclusions
	CLAIMS FILING
Claims may be submitted to J.J. Stanis and	Company, Inc. using the following methods.
	1) By U. S. Mail
	J.J. Stanis and Company, Inc.
	377 Oak Street, Suite 406
	Garden City, New York 11530
	2) Emailed to: Claims1@jjstanisco.com
	3) Faxed to: 516-465-3920
HOW	TO EIND A COLANIC METERNING PROVIDED
	TO FIND A STANIS NET PLUS PROVIDER
Diago Noto: If your destination of Denta	Networks- Stanis Net Plus and enter your search parameters
riease Note: II your dentist is not current	ly a Stanis Net Plus Provider and you would like us to send your provider a packet t
	m click on Dental Networks-Nominate Your Dentist - you will be asked to provide
some contact information for your provide	
	CUSTOMER SERVICE
If you have any questions regarding eligibility, policy or claims, please contact our Customer Service Department, Monday	
through Friday 8:30 a.m5:00 pm at 516-	
	575 of told feet at 1 077 470-0713

^{*} This is just a summary of benefits, please refer to your dental booklet for full listing of benefits including limitations and exclusions.