

SUMMARY 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:	\$50 Member \$50 Dependents, 200 Maximum for family
Plan Coinsurance Levels:	
Diagnostic/Preventative	In-Network - 80% of Stanis Net Plus Fee, Out of Network - 80% Reasonable & Customary
Basic Services	In-Network - 80% of Stanis Net Plus Fee, Out of Network - 80% Reasonable & Customary
Major Services	In-network - 50% of Stanis Net Plus Fee, Out of Network - 50% Reasonable & Customary
Orthodontic Services	In-network - 50% of Stanis Net Plus Fee, Out of Network - 50% Reasonable & 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

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

EXCLUSIONS

See 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 FIND A STANIS NET PLUS PROVIDER

Go to www.jjstanisco.com click on Dental Networks- Stanis Net Plus and enter your search parameters

Please Note: If your dentist is not currently a Stanis Net Plus Provider and you would like us to send your provider a packet to join out network, go to www.jjstanisco.com click on Dental Networks-Nominate Your Dentist - you will be asked to provide some contact information for your provider.

CUSTOMER SERVICE

If you have any questions regarding eligibility, policy or claims, please contact our Customer Service Department, Monday through Friday 8:30 a.m.-5:00 pm at 516-465-3900 or toll free at 1-877-470-6715

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