

City of Winston-Salem Dental Reimbursement Plan - Claim Examples



The following three examples are provided to demonstrate the benefits under your Dental Reimbursement Plan. They are based on this reimbursement schedule as specified by your Plan:

Tier	Amount of Service	Plan Benefit
Tier 1	First \$300 of eligible expenses.	The Plan covers the first \$300 at 100%.
Tier 2	Next \$50 of eligible expenses.	The next \$50 in expenses is the employee's responsibility.
Tier 3	Next \$250 of eligible expenses.	The Plan covers the next \$250 in expenses at 80%.
Tier 4	Final \$1,600 of eligible expenses.	The Plan covers the next \$1,600 in expense at 50%.
Annual Reimbursement Maximum		\$1,300 per covered person.

The first example below assumes an expense of \$500, the second is \$1,000, and the third is an expense of \$3,000. These are examples only. Actual reimbursement amount(s) will vary based upon the submitted claim amounts.

Example 1

Original expense	\$500		
Tier 1	<u>(300)</u>	Plan reimbursement at 100% = \$300.	
Expense balance	200		
Tier 2	<u>(50)</u>	Member responsibility at 100% = \$50.	
Expense balance	150		
Tier 3	<u>(150)</u>	Plan reimbursement at 50% = \$75.	Member responsibility at 50% = \$75.
Expense balance	0		
		Total Plan Reimbursement = \$375.	Total Member Responsibility = \$125.

Example 2

Original expense	\$1,000		
Tier 1	<u>(300)</u>	Plan reimbursement at 100% = \$300.	
Expense balance	700		
Tier 2	<u>(50)</u>	Member responsibility at 100% = \$50.	
Expense balance	650		
Tier 3	<u>(250)</u>	Plan reimbursement at 80% = \$200.	Member responsibility at 20% = \$50.
Expense balance	400		
Tier 4	<u>(400)</u>	Plan reimbursement at 50% = \$200.	Member responsibility at 50% = \$200.
Expense balance	0		
		Total Plan Reimbursement = \$700.	Total Member Responsibility = \$300.

Example 3

Original expense	\$3,000		
Tier 1	<u>(300)</u>	Plan reimbursement at 100% = \$300.	
Expense balance	2,700		
Tier 2	<u>(50)</u>	Member responsibility at 100% = \$50.	
Expense balance	2,650		
Tier 3	<u>(250)</u>	Plan reimbursement at 80% = \$200.	Member responsibility at 20% = \$50.
Expense balance	2,400		
Tier 4	<u>(1,600)</u>	Plan reimbursement at 50% = \$800.	Member responsibility at 50% = \$800.
Expense balance	800	Member responsibility at 100% = \$800.	
		Total Plan Reimbursement = \$1,300.	Total Member Responsibility = \$1,700.