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National Program 2006

DENTAL CARE ADVANTAGE

The DCA program provides members with savings of 20-55% on dental services when seen by a participating dentist, dental group or location. Visit our website at www.amdps.com to locate a dentist in your area.

- No Deductibles
- No Waiting Periods
- No Annual Lifetime Benefit Maximums
- No Claim Forms
- No Prior Authorization Required
- No Employer Contribution Required
- Full And Part-Time Employees Eligible
- Minimum Group Enrollment - One Individual

INCLUDED DENTAL SERVICES

- Examinations
- X-Rays
- Cleanings
- Fillings
- Crowns
- Dentures
- Root Canals
- Oral Surgery
- Orthodontics
- Cosmetics
- Periodontics

PROGRAM NOTE

This program is not a health insurance policy and the program does not make payments directly to the providers of health services. The program member is obligated to pay the provider for all the health care services that the member will receive, but, the member will receive a pre-negotiated discount from the providers listed in the network, in accordance with the specific pre-negotiated discounted fee schedule.

This program provides discounts at certain locations for health services.

ADDITIONAL ADVANTAGES

The Dental Care Advantage Membership entitles you to participation in the Vision Care, Prescription Drug and Chiropractic Discount Programs at no additional cost.



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VISION CARE DISCOUNT PROGRAM

The Vision Care Program is a Discount Program through Block Vision. The program offers a **20% discount** on vision services when using a participating vision location.

- Discount on Exams
- Discount on Eyewear Materials, Including:
 - Frames
 - Tints
 - Anti-Reflective Coatings
 - Lenses
 - Progressive Lenses
 - Contact Solutions
- Discount on Regular Contact Lenses

PRESCRIPTION DRUG DISCOUNT PROGRAM

The Prescription Drug Discount Card Program is a Discount Program through CareMark, offering:

- Average savings of **20%** on brand-name drugs
- Savings up to **55%** on generic drugs

CHIROPRACTIC DISCOUNT PROGRAM

The Chiropractic Discount Program is a Discount Program through Comprehensive Health, offering:

- No-charge consultation
- Unlimited visits per member
- Treatment includes acute, chronic and preventative care
- **50%** savings on diagnostic and x-rays (except Colorado)
- **30%** savings on other services

PROGRAM COST

The Dental Care Advantage program is available to American Trucker.com Members for **\$39.95 per year**.

To enroll, fill out the enrollment form on page 3, include your payment or indicate Credit Card information, and send to:

American Dental Professional Services, 9054 N. Deerbrook Trail, Milwaukee, WI 53223.



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QUESTIONS AND ANSWERS ABOUT THE DENTAL CARE ADVANTAGE PROGRAM

1. HOW DO I SELECT A DENTIST AND MAKE A DENTAL APPOINTMENT?

Visit our web site, www.amdps.com, click on **Provider look-up**, enter your zip code and select a dental office that is convenient for you. When making appointments, please be sure to reference the logos on your ID Card, to refer to the correct network name.

2. DO ALL FAMILY MEMBERS NEED TO GO TO THE SAME DENTIST?

Each family member can choose their own DCA dental provider.

3. IS THE DCA DENTAL PROGRAM AN INSURANCE PRODUCT?

No, the DCA program is a reduced fee program in which the DCA providers have agreed to provide dental care to DCA members for a reduced fee. This results in meaningful member savings in comparison to the normal (UCR) fees typically charged by dentists.

4. DO I NEED TO REMAIN A MEMBER DURING MY ORTHODONTIC TREATMENT?

Yes, you must continue to be a member of the DCA program throughout your entire orthodontic treatment if you want to continue to receive the reduced fees for services provided by a DCA provider.

5. IF I TERMINATE MY AMERICAN TRUCKER.COM MEMBERSHIP, CAN I CONTINUE MY DCA MEMBERSHIP?

Yes, you may continue your DCA membership by purchasing a DCA individual or family membership at the regular annual rates: \$56 for individual, \$86 for individual plus one or \$106 for family.

6. ARE PRE-EXISTING DENTAL CONDITIONS DISCOUNTED?

Yes, the DCA dental program allows pre-existing conditions to be discount if the procedure is listed in the fee schedule. Procedures started prior to the effective date of membership are not eligible for a discount.

7. TO WHAT AGE ARE CHILDREN INCLUDED?

Children who are dependents are able to receive discounted services under the family program until age 19, or to age 23 if they are a full time student. The DCA dental program will accept an employer's eligibility requirements if they are different than those of DCA.

8. HOW CAN I FIND A LIST OF PARTICIPATING PROVIDERS OR LOCATIONS?

To find a participating provider for dental, vision, chiropractic or pharmacy services, visit our web site, www.amdps.com, click on **Provider look-up**, and the appropriate link, and then enter your zip code.

9. MY DENTIST IS NOT A PART OF THE DCA PROGRAM. HOW CAN I ADD HIM/HER TO THE NETWORK?

We look to our customers for referrals of good dentists in their community. Please contact our customer service department at 888-540-9488, or send an email to amdps@amdpi.com.

10. WHO SHOULD I CONTACT IF I NEED ADDITIONAL INFORMATION?

American Dental Professional Services Customer Service Department by phone 888-540-9488; email amdps@amdpi.com; or visit our website: www.amdps.com.



Dental Care Advantage ENROLLMENT APPLICATION For American Trucker.Com

Application Instructions

<p>1. Complete application.</p> <p>2. Choose payment option: check payable to ADPS or indicate Visa or MasterCard information.</p> <p>3. Mail completed form with payment to: American Dental Professional Services 9054 North Deerbrook Trail Milwaukee, WI 53223</p>	<p>Members can also submit applications via: Email application to amdps@amdpi.com Fax application to 414-716-0083</p>
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Program Type Desired: Individual \$39.95 p/year Individual plus One \$39.95 p/year Family \$39.95 p/year

Member Information: Owner - Operator Driver **Email Address:** _____

Last Name	First Name	M.I.	Birth date Mo/Day/Yr	Male	Female
<u>Subscriber</u>			/ /		
<u>Spouse</u>			/ /		
<u>Dependents</u>			/ /		
			/ /		

Street Address _____

City _____ State _____ Zip Code _____ Phone _____

Enrollment Applications received by the 15th of the month will be made effective the 1st of the following month.

Program Payment Options

<input type="checkbox"/> Check: Make check payable to ADPS for your annual payment of \$39.95.
<input type="checkbox"/> Credit Card: Fill out credit card information below for your annual payment \$39.95.
<input type="checkbox"/> Visa <input type="checkbox"/> MasterCard

Credit Card Number _____ Expiration Date _____
I authorize American Dental Professional Services to charge my Credit Card account as indicated above.

Cardholder Signature _____ Today's Date _____

Dental Care Advantage programs are not dental insurance policies and the programs do not make payments directly to the providers of dental services. The program member is obligated to pay the dentist for all the dental care services that the member will receive, but, member will receive a pre-negotiated discount from the dentists listed as providers in the network in accordance with the specific pre-negotiated discounted fee schedule. The programs provide discounts with certain dentists for dental services.

If the member cancels the membership within the first thirty (30) days after receipt of the discount card and other membership materials, the member shall receive a reimbursement of all fees paid. If the member cancels the membership after a period of one month, the reimbursement of membership fees will be prorated.

I/we have reviewed and understand all the program information and agree to the program terms and conditions.

Subscriber Signature: _____

ADPS OFFICE USE	Date Received: _____	Date Entered: _____
Effective Date: _____		