

## **BMTC offers 2 Dental Plans and 1 Vision Plan to Union Members & their Dependents:**

The cost is as follows:

### **WILLAMETTE DENTAL INSURANCE**

MEMBER STATUS	PER PAY PERIOD	CODE
MEMBER ONLY	\$24.68	N54A
MEMBER + 1	\$46.80	N54B
MEMBER + 2 OR MORE	\$61.20	N54C

Willamette Dental offers cost-effective treatment with no deductible and no annual maximum allowance (except TMJ & Orthodontia). You must receive care from a Willamette Dental Group dentist or specialist. The co-pay is \$20 per visit. (See Summary of Benefits for additional co-pays) Website: **Willamettedental.com**

### **STANDARD DENTAL INSURANCE**

MEMBER STATUS	PER PAY PERIOD	CODE
MEMBER ONLY	\$23.14	N57A
MEMBER + SPOUSE	\$42.92	N57B
MEMBER + CHILDREN	\$42.92	N57C
MEMBER + SPOUSE + CHILDREN	\$60.28	N57D

Standard Dental offers treatment with any dentist and the PPO Dental Network is extensive and nationwide; although you may see any dentist, using a PPO dentist is the most cost-effective. There is a \$50 deductible and maximum allowance of \$1000 per calendar year per family member. The Annual Enrollment for Standard is February; there are late entrant penalties if you do not sign up within 30 days of joining the union; or you can sign up with no penalty effective during February each year. Website: **Standard.com**

### **VSP VISION INSURANCE (Through Standard Insurance Company)**

MEMBER STATUS	PER PAY PERIOD	CODE
MEMBER ONLY	\$5.24	N5HA
MEMBER + SPOUSE	\$10.14	N5HB
MEMBER + CHILD(REN)	\$8.38	N5HC
MEMBER + SPOUSE + CHILDREN	\$13.28	N5HD

Standard offers a vision plan through VSP Network. The network is extensive, and you can check for providers at **VSP.com**. There is a \$10 deductible on exams and a \$25 deductible for lenses or frames. After the deductible exams and lenses are covered in full; frames are paid up to \$130.00 based on 12 months between exams and lenses and 24 months for frames based on date of service. Website: **Standard.com** or **VSP.com**

A dependent is defined as, "Member's spouse or domestic partner; a child less than 26 years of age, including step-children & children of domestic partners; a child for whom the Member is required to provide dental coverage under a Qualified Medical Child Support Order; or a child for whom the Member is court-appointed legal guardian."

**For more information regarding member benefits please contact a Chief Steward at (360) 476-2125 or 8066; for TRF contact 360-315-2035 or 1092; contact Gen - email: gen@net-nw.com / phone: 360-373-3874  
CHECK OUT OUR WEBSITE: BMTC.ORG**