



Gossner Foods

HealthSmart Group # GFI

Dental Benefits

For assistance with eligibility, benefits, or claim questions, contact:

HealthSmart Benefit Solutions, Inc.

1-844-600-5840 or visit www.healthsmart.com

The Plan will Pay:

100% of the first \$300 of expenses, then
50% of the balance of expenses up to a
Maximum Annual Benefit per person as follows:
\$500 during first year of coverage
\$750 during second year of coverage
\$1,500 during subsequent years.
Orthodontia is included.

Please refer to Plan Document for Benefit Descriptions.

SUBMIT ITEMIZED DENTAL CLAIMS TO:

HealthSmart Benefit Solutions

PO Box 16887

Lubbock, TX 79490

EDI #: 37272

This outline is only a summary of the benefits provided under the group plan. You must refer to the Summary Plan Description for a complete description of the benefits, limitations and exclusions of the policy. In the event that this outline conflicts with the SPD, the SPD will govern as the formal legal document.