



# My Dental Plan<sup>®</sup>

For Individuals and Families

Ameritas<sup>®</sup>   
fulfilling life.



**Do you want your smile to look its best? Want to do what you can now, to prevent expensive dental work later? Our plans help cover the cost of regular dental exams, cleanings and treatment to help keep your smile healthy for a lifetime.**

- Single or family plans available
- Freedom to see any dentist (save with the Ameritas Dental Network where available)
- Certified excellence in claims service
- If you qualify for takeover, waiting periods are waived (see details on the last page)
- Nine plan options, including plans with a vision, LASIK or hearing care benefit
- Dental Rewards® included as a way to grow the annual maximum

## Member Savings

Plan members may receive additional savings that can reduce out of pocket expenses:

- Save up to 15 percent off eyewear frames and lenses purchased at any Walmart Vision Center nationwide (savings does not include contact lenses or vision care materials)
- Save on prescription medications at many pharmacies across the nation

## Worldwide Support

AXA Assistance USA is part of a global organization with offices in more than 30 countries, where AXA Assistance professionals answer calls 24 hours a day to assist members traveling abroad.

Immediately after a call comes in, an assistance coordinator assesses the situation, provides credible provider referrals and can even help with making the appointment.

Dental or vision provider referral assistance services are independently offered and administered by AXA Assistance USA, Inc. (AXA). Providers referred by AXA are not members of the Ameritas network. Ameritas does not guarantee or make any representation as to the quality of the services provided by AXA or any provider referred by AXA. Referral to an AXA provider is not a guarantee of benefits, and all policy provisions and limitations would apply.



“annual” = calendar year

*Sample My Dental Plan options		Plan 1	Plan 3	Plan 7
<b>Annual maximum benefit</b>		<b>\$500</b>	<b>\$1,500</b>	<b>\$2,000</b>
<b>Dental Rewards® with PPO bonus</b>	<b>Threshold Amount</b>	\$250	\$500	\$500
	<b>Annual Reward</b>	<b>\$125</b>	<b>\$250</b>	<b>\$250</b>
	<b>Maximum Reward (including PPO bonus)</b>	\$500	\$1,000	\$1,000
<p>In areas where PPO is approved, if you qualify for your Annual Reward by seeing an Ameritas Dental Network provider, we'll add a \$50 PPO bonus amount to your Annual Reward. PPO bonus not available in MT or RI.</p>		<p>Boost your annual maximum benefit by submitting at least one dental claim each year and keeping your total benefits received for the year at or below the <b>Threshold Amount</b>. You will “earn” an <b>Annual Reward</b> that you carry over to increase your annual maximum benefit available the next year. Accumulate rewards up to the total <b>Maximum Reward</b> amount. If no dental claims are submitted during a year, no rewards are earned and accumulated rewards are lost. But you can begin building rewards again the very next year.</p>		
<p><b>No waiting periods if you were covered by another dental plan within 30 days of the date we receive your application. See takeover benefits answer, next page, for details. In Vermont, waiting periods are no longer than six months, including ortho.</b></p>				
<b>Waiting periods</b>		Preventive – none Basic – 6 months	Preventive – none Basic – 6 months Major – 12 months	Preventive – none Basic – none Major – 6 months
<b>Deductible (per person)</b>		<b>\$50</b> per plan year	<b>\$50</b> per plan year	<b>\$25</b> per visit
<p><b>Preventive (type 1)</b></p> <ul style="list-style-type: none"> <li>exams/cleanings (once annually Plans 1 &amp; 2; twice annually Plan 3)</li> <li>fluoride treatment under age 14 (once per plan year)</li> <li>bitewing films (once per plan year)</li> <li>full mouth series or panoramic x-ray (once every 5 years)</li> </ul>		<p>Plan Benefit <b>80%</b></p> <p>Member Coinsurance <b>20%</b></p>	<p>Plan Benefit <b>100%</b></p> <p>Member Coinsurance <b>0%</b></p>	<p>Plan Benefit <b>100%</b></p> <p>Member Coinsurance <b>0%</b></p>
<p><b>Basic (type 2)</b></p> <ul style="list-style-type: none"> <li>amalgams &amp; resin restorations (fillings)</li> <li>simple extractions</li> <li>sealants (under age 14)</li> </ul>		<p>Plan Benefit <b>50%</b></p> <p>Member Coinsurance <b>50%</b></p>	<p>Plan Benefit <b>80%</b></p> <p>Member Coinsurance <b>20%</b></p>	<p>Plan Benefit <b>100%</b> of Schedule Sample Schedule Amounts: Filling – One Surface <b>\$60</b> Filling – Multi Surface <b>\$85</b> Extraction <b>\$80</b></p>
<p><b>Major (type 3)</b></p> <ul style="list-style-type: none"> <li>space maintainers</li> <li>root canals</li> <li>surgical endodontics</li> <li>periodontal procedures</li> <li>surgical extractions</li> <li>general anesthesia</li> <li>crowns</li> </ul>		<p><b>not covered</b></p>	<p>Plan Benefit <b>50%</b></p> <p>Member Coinsurance <b>50%</b></p>	<p>Plan Benefit <b>100%</b> of Schedule Sample Schedule Amounts: Crown <b>\$350</b> Root Canal <b>\$335</b></p>
<b>Vision Benefit (Plans 3 and 7)</b>		<p>In sample Plans 3 and 7, there is a \$100 benefit that can be used for exams, frames, lenses or contact lenses. It comes with a vision ID card that explains how to access discounts on eyewear. If you choose to use the vision benefit, it is deducted from the total annual maximum allowed for dental benefits. If you use the plan's entire annual maximum benefit for dental care, no vision benefit will be available that year.</p>		
<b>Orthodontia (Plan 7 Only)</b>		<p>Ortho Coinsurance 50% Ortho Lifetime Deductible \$0 Ortho Lifetime Maximum \$500 Ortho Waiting Period 12 Months Ortho Waiting Period Not Waived for Takeover</p>		
<b>LASIK Advantage</b>		<p>Lifetime Maximum Benefit Per Eye Benefit Year 1 &amp; 2 \$125 Benefit Year 3+ \$250</p> <p>LASIK Advantage provides coverage for LASIK and related procedures, including standard LASIK, Custom LASIK, LASIK with Wavefront Technology, CustomVue LASIK, LASIK with IntraLase technology and Photorefractive Keratectomy (PRK). Members earn a lifetime benefit per eye over time, with the highest coverage provided at year three. Members earn benefits for each eye and may not combine benefits earned for each eye to pay for a covered procedure for a single eye.</p>		

\* Plan designs may vary by state and not all plans are available in all states. Visit ameritas.com, Individuals for details.

\*\* When you visit an Ameritas Dental Network provider, Ameritas sends payment directly to the dentist. There is no balance billing, meaning you won't pay the difference between the dentist's contracted fee and what the plan allows, subject to contractual limitations. When you visit an out-of-network dentist, you must pay the difference between what the plan pays and the dentist's actual charge and may have to submit your own claim.

## Answers

The plans described in this brochure are marketed by Ameritas group division, insured by Ameritas Life Insurance Corp. and administered by HealthPlan Services, Inc.

### Does My Dental Plan offer takeover benefits?

If you were previously covered under a dental plan, you may be eligible for takeover benefits, which means waiting periods are waived. You will be asked to complete and submit a replacement form, plus provide an evidence of coverage letter from your prior carrier. The letter must include a termination date of the prior plan that is no more than 30 days prior to the date we receive your application for coverage.

### Who is eligible to purchase the plan?

The insurance coverage is available in states where it's approved to anyone age 18 and older who does not have coverage through another Ameritas dental plan. You can request coverage for your spouse or dependents; dependent eligibility varies based on state law.

### Can I see the dentist I have now?

Yes, you are always free to visit the dentist of your choice. The Ameritas Dental Network offers more than 428,000 access points nationwide for dental care, which means you benefit from credentialed dentists who offer a discount on services provided. Find a network provider at [ameritas.com](http://ameritas.com).

### How do I apply?

Compare plans and prices, view the Outline of Coverage, and apply online at [ameritas.com](http://ameritas.com), Individuals.

### How much does the coverage cost?

Please go to [ameritas.com](http://ameritas.com), Individuals for plan prices and availability in your area.

### Are my rates guaranteed?

Your rates are guaranteed for 12 months following your plan's effective date. After that, you will receive at least 30 days' notice (more if required by state law) if your rates change.

### When will my policy be effective?

Your policy will be effective on the first day of the month following

the approval of your application and collection of your first month's premium.

### Are there services that are not covered?

An overview of limitations and exclusions is available on the plan details highlight sheet for each plan. Your policy will contain a complete listing of exclusions, covered procedures and any frequency or other limitations on specific procedures.

Please note that procedures begun prior to your effective date are not covered. No benefits are provided for cosmetic procedures or lost or stolen appliances.

### Do I have coverage outside of the state I live in?

Yes, if you are traveling or have a covered dependent living in a different state, you will still have coverage.

### How do I submit claims?

You or your dentist may submit completed claim forms along with any requested information to Ameritas Life Insurance Corp., P.O. Box 82520, Lincoln, NE, 68501-2520, fax 402-467-7336. Dentists may submit claims electronically. For seven years running, our claims contact center associates have earned BenchmarkPortal's Center of Excellence award, an achievement held only by a handful of companies. We believe that being able to count on us for great claims service is one big reason our customers keep coming back.

### What if I want to cancel the policy?

All cancellations must be submitted to HealthPlan Services by calling 800-237-1276 or writing P.O. Box 30102, Tampa, FL 33630-3102. Once the request is received, the policy will be cancelled the later of the first day of the following month or the requested cancel date (must be the first day of a month).

### What if I have more questions?

Please visit us at [ameritas.com](http://ameritas.com), Individuals or contact your insurance agent. Or, if you don't have an agent, please call 844-207-3755 and ask about My Dental Plans.

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**Ameritas for plan info:** [ameritas.com](http://ameritas.com) • **Claims:** 877-667-6127, PO Box 82520, Lincoln, NE 68501-2520

**HealthPlan Services for admin. service:** 800-237-1276, Fax 877-275-0685 • PO Box 30102, Tampa, FL 33630-3102

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119 N Donalson Str

Bainbridge, Georgia 396

229-416-7030 Cell / 229-246-3342 C



This information is provided by Ameritas Life Insurance Corp. (Ameritas Life). Individual dental and vision products (dates may vary by state) are issued by Ameritas Life. Some plan designs are not available in all areas. In Texas, our dental network and plans are referred to as the Ameritas Dental Network. Some states require that producers be appointed with Ameritas Life before soliciting its products. To become appointed with Ameritas Life, please call 800-659-2223. Most plans for groups with 26 or more enrolled lives are administered by Ameritas Life. Billing and eligibility for most plans with 25 or fewer enrolled lives are provided by HealthPlan Services, Inc.

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