FAQ

Frequently Asked Questions

Ameritas PrimeStar® plans

How do I know which dental plan would best fit my client?

While individuals may choose any PrimeStar® plan, there are certain features and plan details that might make one plan more attractive than another for specific individuals. Learn more.

How do I know which plans and enhancements are available in my state?

Plan details, state availability and other resources (including social posts and blog articles) can be found on the agent marketing site. For a high-level overview, view this dental and vision comparison brochure. Due to state restrictions, no marketing materials are available for use in the state of New Mexico, but plans are available through your shopping URL.

Are family plans available?

Yes, dependents can be added when purchasing any dental or vision plan. To add adult or child dependents to a current plan, you or your client can email cs@ameritas.com with the following information: policy number, policyholder name, type of coverage (dental, vision or both), name of dependent(s) and their date of birth, relationship to the policyholder, and the effective date for the new dependent(s). The monthly rate does not increase after 2 dependents are added to a plan.

How do I see my whole book of business on the producer portal?

By registering for the producer portal, appointed agents and brokers will be able to view their book of business. From the Inforce Block section, search by name or Member ID/Confirmation #. If you need assistance with the producer portal, please call Agent Services at 888-517-5307, option 4, email agentservices@ameritas.com, or use the chat feature when you are logged into your portal account.

Who is eligible for credit for prior dental coverage?

Credit for Prior Coverage (CPC) is available to anyone who had a prior inforce group or individual dental plan for 12 consecutive months and no longer than a two month break in coverage prior to the new plan's effective date. They must have been on a fully insured dental plan. DHMO, discount, and Medicare Advantage reimbursement plans are not eligible for CPC. Insureds coming from an Ameritas group or individual policy may have CPC if certain criteria are met. Please call the Sales Connect Team at 888-336-7601, option 2, to discuss the process and requirements.

To be eligible for CPC, the following must be provided during enrollment: the name of the prior carrier, and the term date and policy number of the policy being replaced.

For those applying for coverage on 9/21/22 or after, CPC will be available in all states except FL, ID (Access plan), IN, MD, NJ, NM, NY, OH, OR, SC, TN, VA, and WA. Additional states will be launched in 2023.

How much do my clients save with an Ameritas Dental Network provider?

Network providers typically charge 25-50% less than their regular rates. And some plans offer higher benefit coverage with a network provider. All Ameritas plans provide benefits regardless if the member visits a network or out-of-network provider. Anyone can request a provider be added to the Ameritas network on ameritas.com.

Are pre-existing conditions covered? Are there any limitations on benefits for pre-existing conditions?

A list of standard limitations and exclusion can be found in the ratebook and/or the policy booklet.

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For Producers only

What is the benefit period of most PrimeStar dental plans?

All of our PrimeStar dental plans have benefit year maximums and deductibles (with the exception of Washington PrimeStar plans), which means benefits reset based upon the policyholder's enrollment date.

Can clients who have dental coverage with another carrier use Ameritas coverage for dental services at same time?

The Ameritas PrimeStar dental plans are individual, non-employer based plans. The PrimeStar plans do not coordinate coverage with any other dental plan (group or individual). The PrimeStar plan will always pay full benefits.

What is the difference between a MAC/MAB, PPO, and indemnity plan?

On MAC/MAB and U&C PPO plans, the claim allowance for network provider visits is considered at the Maximum Allowable Charge (MAC), which is the maximum amount a network provider may charge. If a policyholder selects a network provider, they may have lower out-of-pocket costs. On a MAC/MAB plan, if they visit an out-of-network provider, the claim allowance is considered at the Maximum Allowable Benefit (MAB), which is equal to the lowest contracted fee in the ZIP Code area. On an 80th U&C PPO plan, out-of-network dental visits are paid at the 80th percentile of usual and customary charges. This means we expect 8 out of 10 charges from dental providers to be within the amount insurance pays for a covered procedure. On an indemnity plan, covered benefits are paid at the 80th U&C for all provider visits.

What is Preventive Plus and how does it work?

Type 1 Preventive procedures are not deducted from the plan's annual maximum benefit. This saves all of the annual benefit to help pay for more expensive Type 2 and 3 procedures.

How are ID cards accessed and can they be mailed?

Members do not need an ID card to use their dental or vision policy. However, members can immediately download their ID cards (and policies) from their member account. Members who opted for electronic delivery can create an online account at ameritas.com after they receive their second confirmation email (about an hour after enrollment). Members who did not opt for electronic delivery will receive their documents in the mail within 7-10 days.

You can see their Member ID the next day in your producer portal, and can order ID cards to be mailed to them. You, or the member, can order mailed ID cards by calling 800-300-9566, option 3, option 1. PLEASE NOTE: The automated phone system will ask for the 9-digit member ID or confirmation number/date of birth/last name.

Who can I contact for assistance?

Agents can call Sales Connect at 888-336-7601, option 2, or email salesconnect@ameritas.com. You can also find the contact information for our sales team on the agent marketing site.

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All benefits are not available in all states.

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