PrimeStar® Total

Individual dental insurance – MAC/MAB plan
Connecticut & Illinois

- No waiting periods
- No enrollment fees
- Ameritas dental network savings

Plan information

The Ameritas Dental Network is one of the largest in the nation, making it easier for policyholders across the country to see the dentist of their choice.

- 98% of providers stay with Ameritas year after year
- Network dentists charge 25-50% less than their regular rates, providing out-of-pocket savings to policyholders
- The Ameritas Dental Network offers access to providers in the U.S. and Mexico

Policyholders can visit any dentist and family members do not need to visit the same provider. Find a Classic (PPO) network provider at ameritas.com — Find a Health Provider.

MAC/MAB claim allowance

The Maximum Allowable Charge (MAC) claim allowance is the maximum amount a network provider may charge. If a policyholder selects a network provider, they may have lower out-of-pocket costs. If they visit an out-of-network dentist, the claim allowance is considered at the Maximum Allowable Benefit (MAB), which is equal to the lowest contracted fee in the ZIP Code area. Policyholders pay the difference between what the plan pays and the dentist's actual charge.

Preventive Plus

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 Basic and Major procedures.

Plan Details	Day one	After year one
Dental maximum benefit Per person per benefit year	$1,200	
Major services internal max	$600	
Preventive Plus	Included	
Deductible Per person per benefit year	$0 Type 1 $50 Types 2 & 3	
Preventive (Type 1) Exams, cleanings, bitewing X-rays	100%	
Basic (Type 2) Fillings, simple extractions	80%	90%
Major (Type 3) Panoramic X-rays, oral surgery, root canals (endodontics), gum disease treatment (periodontics), crowns, bridges, dentures, implants	50%	
Annual hearing exam benefit	$75	
Hearing aid benefit per ear*	$200 day one $300 after year 1 $400 after year 2	

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Hearing benefit*
Benefits are available for hearing exams and hearing aids. The plan pays 50% of the hearing aid cost up to the maximum benefit per ear.

Five years after using the hearing aid coverage, the policyholder is re-eligible for the benefit at the top level. A reduced benefit is available after three years if there is hearing deterioration the current aids can't correct. All benefits assume no break in coverage.

Additional information
Individuals 18+ and their dependents are eligible for coverage. Coverage can begin as soon as tomorrow. Once enrolled, policyholders will receive their full policy and ID cards within 10 days.

This document is a plan highlight only. The actual policy will include the full legal description of the benefits. Certain plans and plan options may not be available in all areas.

Visit myplan.ameritas.com or your agent's shopping URL for a quote.

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Underwritten by Ameritas Life Insurance Corp. | 5900 O Street Lincoln, NE 68510

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