PrimeStar® Total

Individual dental insurance – MAC/MAB plan

- 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.

Network not available in MT, RI and PA counties of Forest and Potter.

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.

Increasing maximum

Insurance covers a maximum amount per person per benefit period for Basic and Major services combined. The annual maximum benefit increases after year one.

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	$2,000	$2,500
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	20%	50%
Annual hearing exam benefit	$75	
Hearing aid benefit per ear*	$200 day 1 $300 after year 1 $400 after year 2	

Hearing benefit not available in New Hampshire. Preventive Plus not available in Florida.

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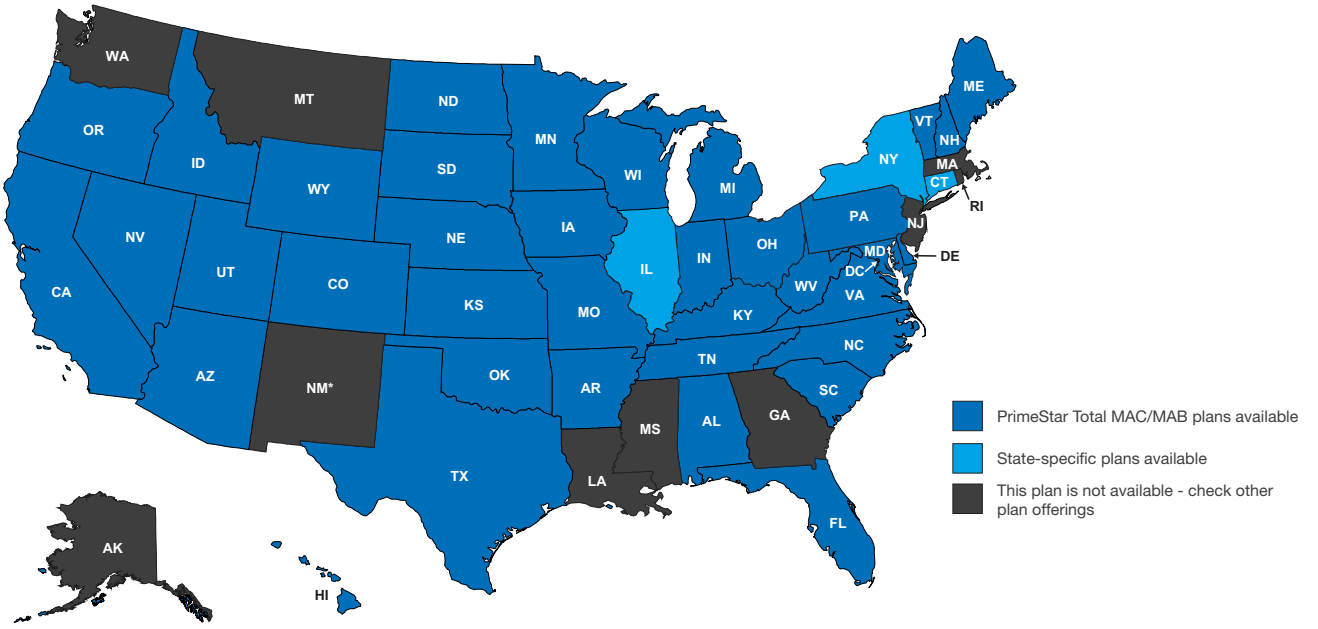
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Hearing benefit*

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.



*Plan design not available in NM - check myplan.ameritas.com for plan details.

In PA, the MAC/MAB plan is not available in the counties of Forest and Potter.

Additional information

Individuals 18+ and their dependents are eligible for coverage. Coverage can begin as soon as tomorrow. Policyholders have the option to access their policy and ID card electronically same-day in the member portal or receive by mail 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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