

Dental Plan Benefits

Type 1 Preventive No Waiting Period	100%	Routine Exam (2 per Benefit Period) Bitewing X-rays (2 per Benefit Period) Cleaning (2 per Benefit Period)
Type 2 Basic No Waiting Period	80%	Restorative Amalgams Restorative Composites Simple Extractions
Type 3 Major 6 Month Waiting Period	50%	Surgical Extractions Endodontics (nonsurgical) Periodontics (nonsurgical) Crowns (1 in 8 years per tooth) Endodontics (surgical) Periodontics (surgical) Prosthodontics (Bridges, Dentures) (1 in 8 years)

Deductible

Type 1	\$5 per person, per visit
Type 2 and 3	\$50 per person, per calendar year

Benefit Year Maximum

Type 1, 2, and 3 (per person, per calendar year)	\$1,000
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Orthodontia Benefits (children under age 19)

6 month waiting period	
Plan Benefit	50%
Lifetime Deductible	\$0
Lifetime Maximum (per person)	\$1,000

Claims Allowance

Type 1, 2 and 3	80th U&C
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In network allowance is discounted fee

Open Enrollment

If you do not elect to participate when initially eligible, you may elect to participate at the policyholder's next enrollment period, which normally coincides with the policy anniversary date.

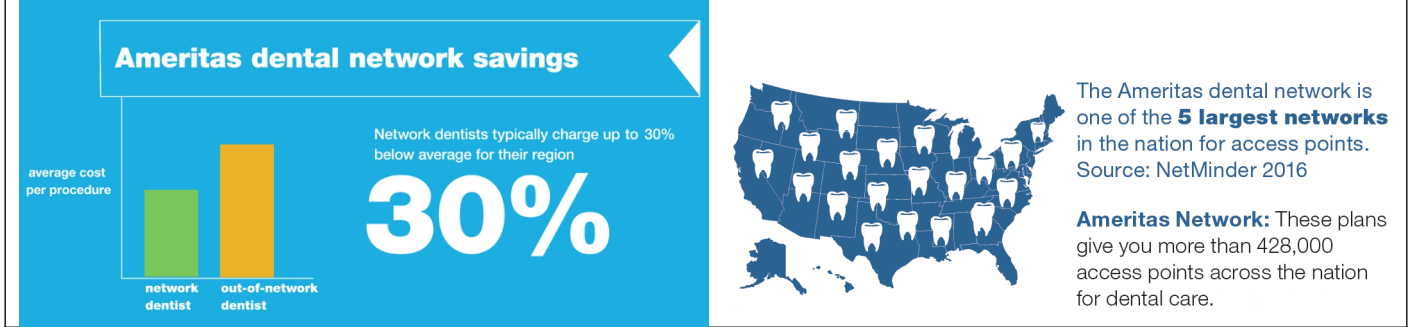
Dental Rewards

Your dental plan includes Dental Rewards as a way to grow your annual maximum benefit. Simply by visiting a dental provider each year and submitting a claim, you can increase your annual maximum benefit over time. After your initial benefit is used, accumulated rewards are there to help pay for more expensive procedures, such as root canals or crowns.

Here's how it works. For each year, you submit at least one dental claim and your total dental benefits paid for the year are at or under \$500 you qualify to carry over \$250 in rewards to the following year. You may accumulate rewards up to the maximum amount of \$1000. Please note, if you do not submit a dental claim during the year, no rewards are earned and accumulated rewards are reset to zero. However, you can start qualifying for rewards again the very next year.

Provider Flexibility and Network Savings

Members aren't limited to one particular dentist, or a small group of providers, who may or may not be taking new patients. Each plan member is free to visit any provider they choose, including your current dentist, regardless if they are in- or out-of-network. And family members do not have to see the same dentist. When you visit an in-network dentist there are no claim forms to complete. For a list of network dentists in your area, go to Find A Provider at ameritas.com.



Late Entrant

We strongly encourage you and/or your dependents to sign up for coverage when you are initially eligible. If you choose to enroll after initially declined, you and/or your eligible dependents will be considered a Late Entrant. Covered expenses will not include and benefits will not be payable in the first 12 months that a person is insured if the person is a Late Entrant; except for evaluations, prophylaxis (cleanings), and fluoride application. After 12 months, you will have access to all of the plan's benefits.

Customer Service

Customer Connections **800-487-5553** www.Ameritas.com
Monday - Thursday 7am-12am CST, Friday 7am-6:30pm CST

This document is a highlight of plan benefits provided by Ameritas Life Insurance Corp. as selected by your employer. It is not a certificate of insurance and does not include exclusions and limitations. For exclusions and limitations, or a complete list of covered procedures, contact your benefits administrator.