

Ameritas PrimeStar® Product Handbook

An overview of Ameritas individual dental and vision plans



Ameritas Life Insurance Corp. Ameritas Life Insurance Corp. of New York

Ameritas individual products

Have confidence selling Ameritas dental and vision insurance. We make the entire process simple from enrollment to claims processing.

Why sell dental and vision insurance?

Dental and vision are an extension of healthcare and are highly requested benefits by people of all ages. A healthy smile builds confidence and healthy vision creates independence. Plus, dental and vision providers often see their patients on a regular basis and can catch other health issues early.



Gum disease affects more than 2 in 5 adults between the ages of 45 and 64.1

Gum disease is associated with nearly 60 other health problems, including diabetes, heart conditions and Alzheimer's disease.¹



An eye exam can identify early warning signs of more than 270 diseases including diabetes, high blood pressure, autoimmune diseases and cancers.²

A comprehensive eye exam is the only way to visualize the blood vessels behind the eye without an X-ray, CT scan or invasive surgery.²

Why sell Ameritas products?

Ameritas is a carrier you can trust to take care of you and your clients. Our individual dental and vision plans provide your clients with comprehensive next-day coverage, access to nationwide dental and vision networks and competitive benefit allowances.

We also make your job easier with a simple online enrollment process, knowledgeable support teams to answer your questions and easy-to-use online tools to manage your commissions, access marketing materials and more.



Forbes Advisor ranked Ameritas the best individual dental insurance company for seniors in 2023.

Dental network

The Ameritas Dental Network is one of the nation's largest. Members can see any dentist they choose, in- or out-of-network. Dentists in the Ameritas network have agreed to charge 25-50% less than their regular rates, which can lower out-of-pocket costs. Search Classic (PPO) network providers at ameritas.com – Find a Health Provider.

Vision networks

Ameritas provides vision benefits with the two largest vision networks, VSP and EyeMed. These partnerships pair the nationwide vision networks with Ameritas' expertise in actuarial, underwriting and administration.

Ameritas offers plans to fit your clients' needs regardless of age* or budget. All plan pricing is determined by location, not by age. Visit your shopping URL or myplan.ameritas.com for exact rates.

Dental overview

PrimeStar Lite	PrimeStar Boost	PrimeStar Complete
For those with a healthy mouth who usually visit a network provider.	For families who want robust coverage including benefits for teeth whitening and child orthodontia.	For those who want the highest level of dental coverage and benefits for hearing care.
Average cost \$30.46/month	Average cost \$57.61/month	Average cost \$66.58/month

Vision overview

PrimeStar Basic	PrimeStar Select	PrimeStar Choice			
No network	EyeMed Access network	VSP Choice network			
• Lens benefit every 12 months, frame benefit every 24 months	Lens and frame benefits every 24 months	Lens and frame benefits every12 months			
 \$65 frame and \$100 contact lens benefit 	• \$130 frame or contact lens benefit	• \$150 frame or contact lens benefit			
Average cost \$9.66/month	Average cost \$10.67/month	Average cost \$16.34/month			

PrimeStar Basic is only offered in MA, MT, RI and WA.

Prescription drug savings

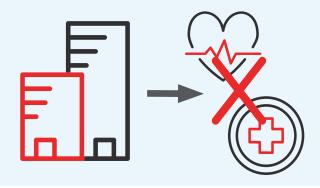
Through their member portal, your clients will have access to an ID card to save on prescription medications at many pharmacies across the nation, including CVS, Walgreens, Rite Aid and Walmart. This is available at no additional cost to the plan premium and is not insurance.

Hearing savings

Your clients can save on hearing exams and hearing technology. If they choose a plan with hearing benefits, they can visit the provider of their choice with additional discounts available through Great Hearing Benefits. They receive the same special pricing if they choose a plan without hearing benefits. More information is available in the member portal and at greathearingbenefits.com/ameritas. This is available at no additional cost to the plan premium and is not insurance.

Additional resources

Learn more about Ameritas and our individual products by visiting explore.ameritas.com/agentmarketing. We offer educational resources including brochures and videos to help you sell Ameritas products. The site also has materials you can share with clients including social media posts and images.



64% of uninsured workers were not offered health benefits by their employer.³

^{*}Individuals 18+ and their dependents are eligible for coverage.

Dental plan details

Plan comparison

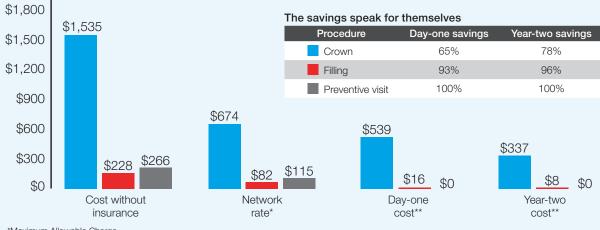
	PrimeS	tar Lite	PrimeSt	ar Boost	PrimeStar Complete		
	Day one After year one		Day one After year one		Day one	After year one	
Dental maximum benefit Per person per benefit year	\$750 \$1,500		\$1,500	\$1,500 \$2,000		\$3,000	
Preventive Plus	Inclu	ided	Inclu	uded	Included		
Deductible Per person per benefit year	\$0 Ty \$50 Typ	/pe 1 es 2 & 3	\$0 Ty \$50 Typ		\$0 Type 1 \$50 Types 2 & 3		
Preventive (Type 1)	Exams, o	cleanings	Exams, cleanings, bit (up to age 16), sealar	ewing X-rays, fluoride ats, space maintainers	Exams, cleanings, bitewing X-rays		
	100% in 70% out-	-network of-network		-network of-network	100% in-network 90% out-of-network		
D : (T = 0)		e (up to age 16), fillings, ce maintainers	Fillings, simp	le extractions	Fillings, simple extractions		
Basic (Type 2)	50% in-network 25% out-of-network	80% in-network 40% out-of-network	65% in-network 45% out-of-network	80% in-network 60% out-of-network	80% in-network 70% out-of-network	90% in-network 80% out-of-network	
Major (Type 3)	root canals (endodontics)	xtractions, oral surgery,), gum disease treatment ns, bridges, dentures	Other X-rays, oral surgery, gum disease treatment bridges, dentures, imp		Other X-rays, oral surgery, root canals (endodontics), gum disease treatment (periodontics), crowns, bridges, dentures, implants		
	10% in-network 5% out-of-network	20% in-network 10% out-of-network	20% in-network 10% out-of-network	50% in-network 30% out-of-network	20% in-network 15% out-of-network	50% in-network 40% out-of-network	
Child orthodontia	No benefit		15%	50%			
Under age 19 Lifetime maximum per person			\$1,000		No benefit		
Hearing benefit	The hearing exam and hearing aid benefits are separate from the dental maximum benefit						
Annual hearing exam benefit					\$75		
Hearing aid benefit of 50% up to the maximum benefit amount per ear*	No be	enefit	No benefit		\$200 day 1 \$300 after year 1 \$400 after year 2		

^{*} Once the hearing aid benefit is used, at any level, members become re-eligible for the benefit, at the top level, after five years as long as there is no break in coverage. A reduced benefit is available after three years if there is hearing deterioration the current aids can't correct, as long as there is no break in coverage. The benefit cannot be combined toward double coverage for a single ear. The hearing benefit is separate from the dental maximum benefit.

Plans and plan options may not be available in all areas. Visit your shopping URL or <u>myplan.ameritas.com</u> to find plans in a specific ZIP Code.

Savings example

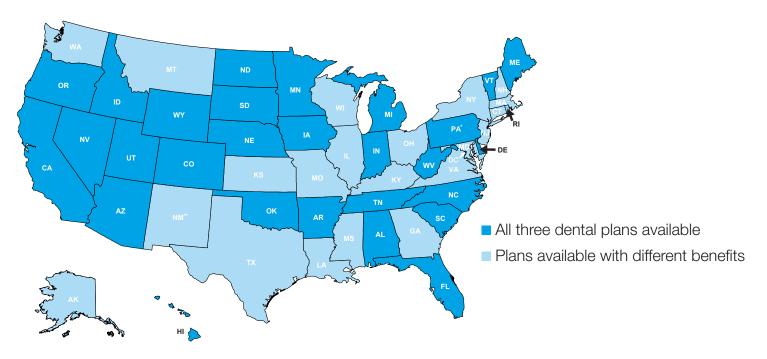
Your clients save money on dental services with any dental provider. They can save even more on out-of-pocket costs when they visit an Ameritas Dental Network provider. Here is an example with the PrimeStar Complete plan.



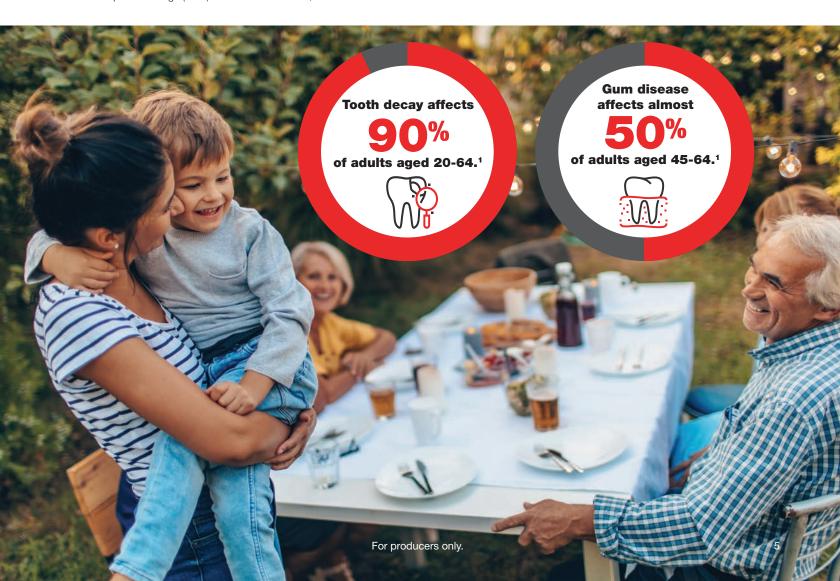
^{*}Maximum Allowable Charge

^{**}Cost shown above is based on network rates and does not include deductibles.

Plan availability



- * Some plan benefits are not available in the PA counties of Forest and Potter. ** This piece is not for use in NM.
- $\dot{\mbox{C}}$ Credit for prior coverage (CPC) is not available in NM, NY or WA.



Understand dental benefits

We realize that dental benefits may not be your area of expertise. Luckily, it is ours! Here is more information about benefits and terminology you might encounter during the enrollment process.

Additional benefits

Preventive Plus

On all dental plans, Preventive (Type 1) procedures are not deducted from the plan's annual maximum, saving the annual benefit for more expensive procedures.

Teeth whitening

PrimeStar Boost provides Major (Type 3) coverage toward professional teeth bleaching procedures, also known as whitening.

Child orthodontia benefit

PrimeStar Boost includes a lifetime orthodontia benefit for dependent children up to age 19.

Hearing benefit

Separate from the dental maximum, the PrimeStar Complete plan provides coverage for hearing exams and hearing aids to policyholders of all ages. The non-insurance hearing savings program (described on page 3) can be used alongside the hearing plan benefit for additional out-of-pocket savings.

Credit for prior coverage (CPC)

On all dental plans, qualified policyholders can receive year-two benefits for Preventive, Basic and Major dental services on day one. Restrictions apply, see page 10 for more details. Not available in New Mexico, New York or Washington.





Common terms

Annual maximum

The annual maximum benefit is the amount of insurance available per year. All states except Washington have benefit-year maximums, which means benefits reset based upon the policyholder's effective date. Most plans have maximums that increase after the first year on the plan.

Billing date

The bill day is driven by the effective date. For example, if the plan starts on July 10th, it will bill the first time on July 10th and on the 10th of each subsequent month. This day can be changed any time after the first payment is made.

Deductible

The deductible is the amount the policyholder pays before benefits apply. Most PrimeStar plans waive the deductible on Preventive (Type 1) services and have a combined deductible for Basic (Type 2) and Major (Type 3) services. With shared deductibles, the deductible applies to the first service that is received annually.

Effective date

The effective date is the date the policyholder chooses for their coverage to begin. This can be as soon as the day after completing enrollment, and up to 90 days from enrollment.

Increasing coverage

To encourage persistency, most plans increase coverage and/or maximum benefits after the first year on the plan. The plan benefits will show day-one coverage, which applies the first day the plan is effective. After one year on the plan (except in Washington, which is by calendar year), benefit coverage may increase and stay at the higher level of coverage for subsequent years.

Plan benefits

Most states show the percentage the insurance plan pays for procedures. There are separate coverage percentages based on the category of service, such as Preventive (Type 1), Basic (Type 2), Major (Type 3) and Orthodontic services.

Residency

Since we are regulated by the State Departments of Insurance, we are required to issue plans to the state of residence. In the case of a true dual residency, either state can be used. A person who moves from one state to another, after reporting the change to our administrative team, will be contacted by the sales connect team if they need to change to a different plan.

Vision plan details

Most states offer the choice of two plans featuring the EyeMed and VSP networks. To help your clients choose a vision plan, first ask them to check which network their preferred vision provider is part of, or which retailer they visit. If their provider is part of both networks, then look at which frequencies and allowances are best for their needs.

Plan comparison

	PrimeStar Basic Vision*			PrimeStar Select Vision			PrimeStar Choice Vision				
Network	No Network Restrictions			EyeMed Access Network			VSP Choice Network				
	Frequency	Deductible	Allowance	Frequency	Deductible	In-network benefit	Out-of- network allowance	Frequency	Deductible	In-network benefit	Out-of- network allowance
Eye exam	Every 12 months	\$10	Up to \$50	Every 12 months	\$25	100%	Up to \$50	Every 12 months	\$10	100%	Up to \$45
Lenses	Every 12 months	\$50 (per lifetime)**	Up to \$100 [†]	Every 24 months	\$25	Up to 100%	Up to \$100 [†]	Every 12 months	\$20**	Up to 100%	Up to \$100 [†]
Frames	Every 24 months	\$50 (per lifetime)**	Up to \$65	Every 24 months	\$0	Up to \$130	Up to \$70	Every 12 months	\$20**	Up to \$150	Up to \$70
Contacts (in lieu of glasses)	Every 12 months	\$0	Up to \$100	Every 24 months	\$0	Up to \$130	Up to \$105	Every 12 months	\$0	Up to \$150	Up to \$105

^{*} PrimeStar Basic is only offered in MA, MT, RI and WA.

Savings example

Vision benefits are straightforward. Your clients will save money on their vision exam and vision correction materials. This example shows how much your clients can save with Ameritas PrimeStar vision insurance on an exam and glasses with single vision lenses.



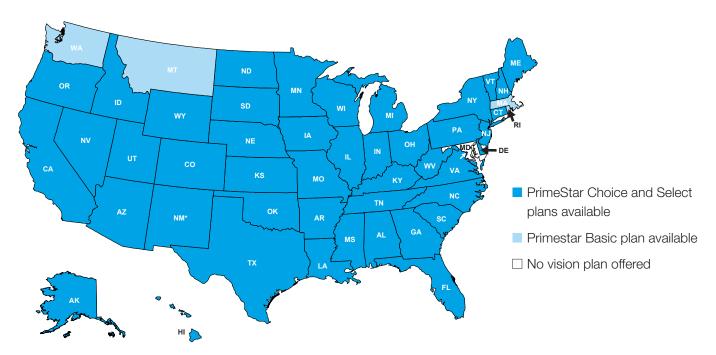
Actual savings will vary depending on provider charges and materials purchased.

Presbyopia: difficulty seeing at close distances due to loss of elasticity of the lens of the eye

Typically beginning in the early to mid-40s, this is among the most common vision issue adults develop between ages 41 to 60.⁵ Adults who previously had great vision may need vision correction for the first time, and they will be more interested in vision insurance to help cover the cost of exams and materials.

^{**}This plan features a combined deductible for frames and lenses.

Plan availability



^{*}This piece is not for use in NM

Vision networks

PrimeStar Select: EyeMed Access network

Five of the top six national retail chains accept EyeMed, including:

LENSCRAFTERS'

PEARLE OOVISION



contactsdirect

GLASSES.

Contacts Direct and Glasses.com offer online shopping. Both are in the EyeMed network and apply vision benefits to the online order.

EyeMed discounts include 20% off the remaining frame balance, materials not covered by the plan, and nonprescription sunglasses.

Based on applicable laws, reduced costs may vary by doctor location.

PrimeStar Choice: VSP Choice network

VSP has the largest network of independent doctors nationwide. Retail locations[†] include:









eyeconic

Eyeconic is VSP's in-network online eyewear store. Vision benefits are applied directly to the online order.

VSP discounts include 20% off the remaining frame balance, additional prescription glasses, and non-covered lens options. VSP offers an extra \$20 to spend on featured frame brands.

The PrimeStar Basic plan does not have a network. This reimbursement plan gives policyholders more control over how benefits are spent.

- Your client selects the vision provider of their choice, pays the provider and submits a claim within 90 days for reimbursement.
- Benefits can be used with special pricing, coupons and offers through the provider.



1 in 5 Americans say their vision provider detected a non-eye related health issue.2

[†] Not all providers at Costco locations are VSP network providers. Clients should verify their provider is in the VSP network before seeking services. The frame allowance at some retailers may be less due to lower wholesale pricing.

Frequently asked questions

Have questions? We have answers. For more information about the producer portal, contact Agent Services at <u>agentservices@ameritas.com</u>. For questions about plans, contact Sales Connect at salesconnect@ameritas.com.

Selling

How do I start selling?

Your shopping URL is available in your producer portal at <u>producerportal.ameritas.com</u>. View this <u>quick start guide</u> for more information.

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. CPC is currently available in all states except NM, NY and WA.

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. Please call the Sales Connect team at 888-336-7601, option 2, to discuss the process and requirements.

Are there limitations on benefits for pre-existing conditions?

A list of standard limitations and exclusions can be found in the rate book and/or the policy booklet.

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

The PrimeStar plans do not coordinate coverage with any other dental plan (group or individual). The PrimeStar plan will always pay full benefits.

Enrollment

What if my client has a question during the enrollment process?

They can contact Sales Connect at <u>salesconnect@ameritas.com</u> or 888-336-7601. There is also a chat function on your shopping site. Your client will need to mention that they are working with you as their agent.

Can I complete the enrollment on behalf of my clients?

Yes, individuals can enroll on their own through your unique shopping URL, or you can complete the online enrollment for them. You will need all of your client's, and any dependents', information including their name, date of birth, address, email and payment information.

How can I help them choose a dental plan?

You can gather information such as:

- the amount of dental work expected each year (review annual maximum and benefit level coverage)
- their monthly budget for plan premiums
- if they need features like teeth whitening, child orthodontia or hearing coverage



Post-enrollment

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 download their ID cards (and policies) from their member account. Members who opted for electronic delivery can create an online account at <u>ameritas.com, Sign In</u> 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 replacement ID cards for those who did not opt for electronic delivery. 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.

What else is available in the member portal?

- Full exclusions and limitations are in the member portal plan documents.
- Members can view their plan benefits, look up information about their claims and remaining benefits, and sign up to receive their explanation of benefits (EOBs) electronically.
- Members can search dental cost estimates for both in- and out-of-network dental providers in their area.
- Savings cards for prescriptions and hearing care can be accessed in the portal and are offered at no additional cost to the plan premium.

What if the individual needs to update their account?

- The payment frequency is automatically set to monthly. They can change their frequency to quarterly, semi-annually or annually in the member portal at ameritas.com or by calling administration at 800-300-9566, option 3.
- They can update a payment method, an email or phone number, a street address, and add or remove dependents in the member portal.

Can I add a dependent to an existing plan?

Yes. 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. Your clients also can add or remove dependents in their member portal.

What if they want to cancel their dental or vision coverage?

All plans continue until the policyholder calls or emails to cancel their plan. They will receive a renewal letter each year with updated rates for the following year.

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

By registering for the <u>producer portal</u>, agents and brokers will be able to view their book of business. From the Inforce Block section, search by name or Member ID/Confirmation # (at least three characters). Your compensation statements are under the Compensation tab. If you need assistance with the producer portal, please call Agent Services at 855-517-5307, option 4, email <u>agentservices@ameritas.com</u>, or use the chat feature when you are logged in to your portal account.

Resources

We are here to help you be successful. Explore the online tools developed to make your job easier. And let us know how we can help.

Producer portal

The producer portal lets you manage your business on your schedule and simplify the daily tasks that are necessary for success. Go to your producer portal at producerportal ameritas.com. View this quick start guide for more information.

Shopping URL

Ameritas individual dental and vision plans can be viewed, quoted and purchased online. Share your unique shopping URL with clients to receive automatic credit for sales. Your shopping URL was provided in an email when you became appointed with Ameritas. It is also available in your producer portal by clicking the blue Quote button, and then Quote for Individual Products. Be sure to save your URL by bookmarking it in your web browsers.

Marketing materials

The agent marketing site has educational resources and marketing materials to help you learn about and sell Ameritas individual dental and vision products. Since there is no secure business information on the marketing site, there is no login required. It is located at explore.ameritas.com/agentmarketing.

Support team

The Sales Connect team is dedicated to supporting you. They can assist with both pre-and post-sale inquiries.



salesconnect@ameritas.com



Phone: 888-336-7601

English: option 2 **Spanish:** option 7

Mon-Thurs 8 a.m.-5 p.m. Friday 9 a.m.-4:30 p.m.



Chat: Available on shopping site

Mon-Thurs 8:30 a.m.-4:30 p.m.

Friday 9 a.m.-4 p.m.



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- 1 Oral Health in America: Advances and Challenges, A Report from the National Institutes of Health, 2021
- 2 See the Full Picture of Your Health with an Annual Comprehensive Eye Exam, American Optometric Association, 2023
- 3 Key Facts about the Uninsured Population, KFF 2022 4 Dental, Hearing, and Vision Costs and Coverage Among Medicare Beneficiaries in Traditional Medicare and Medicare Advantage, KFF 2021
- 5 Adult Vision: 41 to 60 Years of Age, American Optometric Association, 2023

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