

PrimeStar[®] Complete

Individual dental insurance – MAC/MAB plan
New York



• High annual maximum

• No waiting periods

• Dental network savings

Plan overview

The PrimeStar Complete plan is great for those who want the highest level of dental coverage.

Plan Details	Day one	After year one
Dental maximum benefit Per person per benefit year	\$750	\$3,000
Preventive Plus	Included	
Deductible Per person	\$0 Type 1 \$50 Types 2 & 3	
Preventive (Type 1) Exams, cleanings, bitewing X-rays	100% in-network 80% out-of-network	
Basic (Type 2) Fillings, simple extractions	80% in-network 70% out-of-network	90% in-network 80% out-of-network
Major (Type 3) All other X-rays, oral surgery, root canals (endodontics), gum disease treatment (periodontics), crowns, bridges, dentures, implants	50% in-network 50% out-of-network	

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.

Network 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.

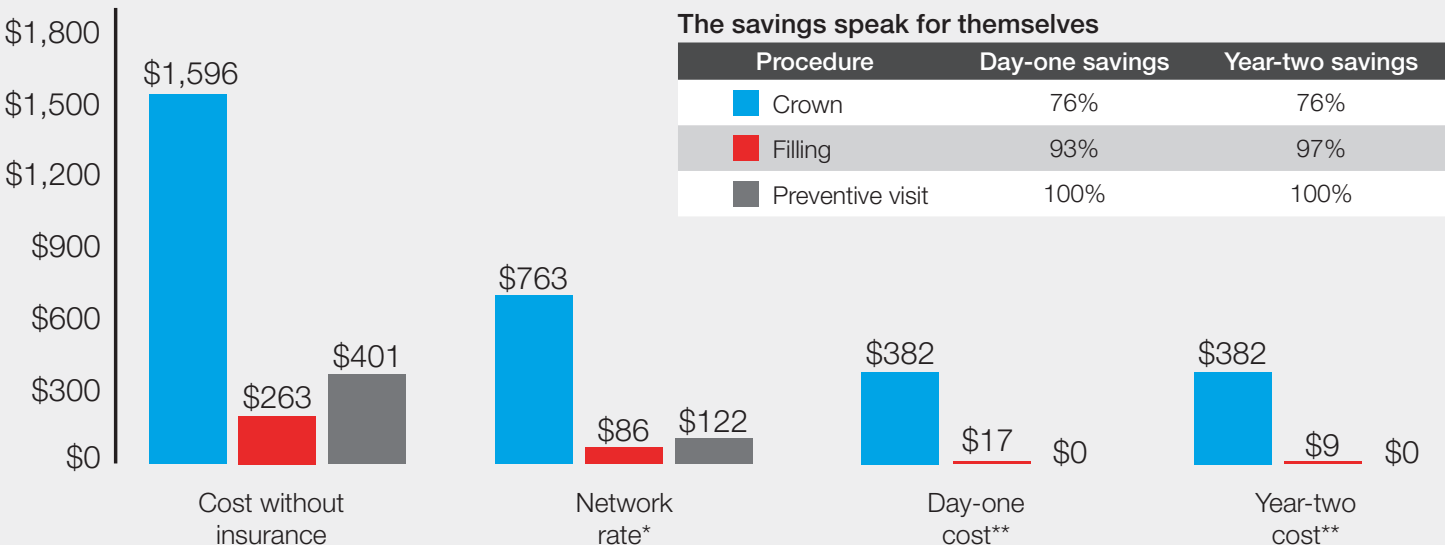
Policyholders can visit any dentist and family members do not need to visit the same provider. The network offers access to providers in the U.S. and Mexico. Find a [Classic \(PPO\) network provider](#) at [ameritas.com](#) — Find a Health Provider.

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Visit a network provider to maximize savings



*Maximum Allowable Charge

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

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 network contracted fee in the ZIP Code area. Policyholders pay the difference between what the plan pays and the dentist's actual charge.

Additional information

Individuals 18+ and their dependents are eligible for coverage. Coverage can begin as soon as tomorrow. Policyholders are automatically opted in to receive same-day access to their policy and ID card electronically in the member portal, or they can opt-out and receive them 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 your agent's shopping URL for a quote.



Ameritas Life Insurance Corp. of New York

The cost example reflects amounts specific to PrimeStar Complete benefit levels. Allowance and cost estimates are specific to ZIP Code 113XX. Preventive visit consists of exam, cleaning, and bitewing X-ray. For illustrative purposes, the initial cost without insurance has been estimated. Actual charges may vary. Deductibles not shown.

Underwritten by Ameritas Life Insurance Corp. of New York | 1350 Broadway Suite 2201 New York, NY 10018

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