

# Ameritas group products

Available In Most States

DENTAL PRODUCTS				
INDIVIDUAL PLANS	Minimum Enrolled Employees Required	Minimum Participation	Minimum Employer Contribution	Product Notes
My Dental Plan®	1	One life	N/A	<ul style="list-style-type: none"> <li>• Several plan designs—simple online application</li> </ul>
20/20 Plus® Plan	1	One life	N/A	<ul style="list-style-type: none"> <li>• Several plan designs—simple online application</li> </ul>
TAILORED GROUPS: 3+ ENROLLED LIVES				
Voluntary	3	Greater of 20% or 3 enrolled lives	None	<ul style="list-style-type: none"> <li>• Variety of flexible plan designs</li> <li>• Takeover available with some plans down to 3 enrolled lives</li> </ul>
Contributory	3	Greater of 60% or 3 enrolled lives	25% of total premium	<ul style="list-style-type: none"> <li>• Variety of flexible plan designs</li> <li>• Takeover available with some plans down to 3 enrolled lives</li> </ul>
Employer Paid	3	Greater of 100%, or 100% of employees unless covered elsewhere, or 3 enrolled lives	100% of employee or employee and dependent premiums	<ul style="list-style-type: none"> <li>• Variety of flexible plan designs</li> <li>• Takeover available with some plans down to 3 enrolled lives</li> </ul>
SPECIAL FEATURES FOR DENTAL PLANS				
FUSION The Ultimate Choice® (combined dental and vision plan)	3	See tailored group dental rules	See tailored group dental rules	<ul style="list-style-type: none"> <li>• Combines maximums, deductibles, and/or exam frequencies on dental and vision plan for consumer choice</li> <li>• Variety of flexible plan designs</li> </ul>
High/Low Plans	10	See tailored group dental rules	None or contributory	<ul style="list-style-type: none"> <li>• Minimum of 20 eligible lives required for voluntary</li> </ul>
Core/Buy-Up Plans	10	100% enrollment (no less than 10 enrolled lives) in core plan required	100% of core plan employee premium	<ul style="list-style-type: none"> <li>• Variety of flexible plan designs</li> </ul>
Incentive Coinsurance (increasing coinsurance benefit)	3	See tailored group dental rules	N/A	<ul style="list-style-type: none"> <li>• Coinsurance increases with submitted claim each year</li> <li>• Provides incentives for employees to maintain good oral health</li> </ul>
Dental Rewards® (rollover maximum)	1	Tied to dental plan for employee and dependents	N/A	<ul style="list-style-type: none"> <li>• Increasing benefit available over time</li> </ul>
Preventive Plus <sup>SM</sup>	3	See tailored group dental rules	N/A	<ul style="list-style-type: none"> <li>• Plan payments for covered Type 1/Preventive procedures are not deducted from the annual maximum benefit</li> </ul>
LASIK Advantage® (laser vision correction benefit)	10	Tied to dental or vision plan for employee and dependents	N/A	<ul style="list-style-type: none"> <li>• Increasing benefit available over time</li> <li>• Only sold with an Ameritas dental or vision plan</li> </ul>
Per-Visit Deductible	3	See tailored group dental rules	N/A	<ul style="list-style-type: none"> <li>• Similar to co-pays on medical plans</li> <li>• Reduces premium costs</li> </ul>
<b>ADMINISTRATIVE SERVICES ONLY (ASO)</b>	120	100 or more enrolled lives	Not recommended for employee pay-all plans	<ul style="list-style-type: none"> <li>• No pre-funding of ASO account required if using weekly or bi-weekly ACH for payment</li> </ul>

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## VISION PRODUCTS

TAILORED GROUPS: 3+ ENROLLED LIVES	Minimum Enrolled Employees Required	Participation	Employer Contribution	Product Notes
Focus®	3	Varies, some plans down to 3 enrolled lives	Employer paid, contributory or employee pay-all	<ul style="list-style-type: none"> <li>In- and out-of-network benefits</li> <li>Features VSP Signature or VSP Choice Network</li> <li>Add eye exam to dental plan</li> </ul>
Vision Perfect®	3	Varies, some plans down to 3 enrolled lives	Employer paid, contributory or employee pay-all	<ul style="list-style-type: none"> <li>Indemnity—no network</li> <li>Exam and materials or materials only option</li> <li>Unique flat maximum</li> </ul>
EyeChoice® (Brochure Plans)	3	Varies, some plans down to 3 enrolled lives	Employer paid, contributory or employee pay-all	<ul style="list-style-type: none"> <li>Choose from Focus and Vision Perfect plans</li> <li>Flat 10% commissions</li> </ul>
<b>ADMINISTRATIVE SERVICES ONLY (ASO)</b>	200	250 or more eligible lives	Not recommended for voluntary, employee pay-all plans	<ul style="list-style-type: none"> <li>Also available at 100 enrolled lives for vision if sold with an Ameritas dental plan</li> </ul>

## HEARING CARE PRODUCTS

	Minimum Enrolled Employees Required	Participation	Employer Contribution	Product Notes
SoundCare® (Hearing Care Plans)	10	Participation tied to dental or vision plan, some plans down to 10 enrolled lives	Employer paid, contributory or voluntary. Ask your sales rep for complete details	<ul style="list-style-type: none"> <li>Coverage for exams, hearing aids and maintenance</li> </ul>
SoundCare® (Stand Alone)	50	100% of total eligible	Non-contributory (100% participation)	<ul style="list-style-type: none"> <li>May be available on a stand-alone basis for 50+ enrolled lives</li> </ul>

## ADDITIONAL

	Minimum Enrolled Employees Required	Participation	Employer Contribution	Product Notes
Eyewear Savings	N/A	Tied to dental, Vision Perfect, LASIK or hearing care plan	Tied to dental, Vision Perfect, LASIK or hearing care plan	<ul style="list-style-type: none"> <li>Members save up to 15% on eyewear frames and lenses purchased at any Walmart Vision Center nationwide</li> </ul>
Prescription Savings	N/A	Tied to dental, vision or hearing care plan	Tied to dental, vision or hearing care plan	<ul style="list-style-type: none"> <li>Members save on prescription medications at Walmart and Sam's Club</li> </ul>

**NOTE:** This is an illustration of available products only. Not all products or options available in all states—speak to your Ameritas Sales Representative to confirm availability in your state. Our proposal will spell out specific plan design, rates and participation required. \*Some small group products offered jointly with HealthPlan Services.

For complete product details, or to request a quote, please contact:



This information is provided by Ameritas Life Insurance Corp. (Ameritas Life). Group dental, vision and hearing care products (9000 Rev. 03-08, dates may vary by state) and individual dental and vision products (Indiv. 9000 Ed. 11-09) are issued by Ameritas Life. Some plan designs are not available in all areas. In Texas, our PPO network and plans are referred to as the Ameritas Dental Network. Some states require that producers be appointed with Ameritas Life before soliciting its products. To become appointed with Ameritas Life, please call 800-659-2223. Most plans for groups with 26 or more enrolled lives are administered by Ameritas Life. Billing and eligibility for most plans with 25 or fewer enrolled lives are provided by HealthPlan Services, Inc.

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