

FUSION combines dental and eye care benefits into one easy-to-administer plan. This plan combines the annual maximum between the dental and vision plans.

For the maximum:

The member can use up to \$1,000 toward any covered dental expense.

Eye care expenses will be subject to the eye care plan allowances.

Total benefits paid between the two coverages will not exceed \$1,000.

Dental Plan Benefits *subject to FUSION plan design listed above*

Type 1 Preventive No Waiting Period	100%	Routine Exam (1 per 6 months) Bitewing X-rays (1 per 12 months) Cleaning (1 per 6 months)
Type 2 Basic No Waiting Period	80%	Restorative Amalgams Restorative Composites Endodontics (nonsurgical) Periodontics (nonsurgical) Endodontics (surgical) Simple Extractions
Type 3 Major No Waiting Period	50%	Surgical Extractions Crowns (1 in 10 years per tooth) Periodontics (surgical) Prosthodontics (Bridges, Dentures) (1 in 10 years)

Deductible

Type 1	\$0
Type 2 and 3	\$50 per person, per calendar year
Family Maximum	\$150 per Calendar Year

Benefit Year Maximum

Type 1, 2, and 3 (per person, per calendar year)	\$1,000
-----------------------------------------------------	---------

Orthodontia Benefits (children under age 19)

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

Claims Allowance

Type 1, 2 and 3	90th U&C
-----------------	----------

In network allowance is discounted fee

Vision Plan Benefits *subject to FUSION plan design listed above*

<i>Allowances</i>		<i>Frequencies Based on date of service**</i>	
Exam	Up to \$50	Exam	1 in 12 months
Lenses (per pair)		Lenses	1 in 12 months
Single	Up to \$35	Frames	1 in 24 months
Bifocal	Up to \$50		

Trifocal	Up to \$65		
Lenticular	Up to \$70		
Progressive	Up to \$70		
Contacts			
Elective/Medically Necessary	Up to \$135		
Frames	\$100		
		Maximum	None
		Deductibles (Lifetime deductible)	\$0

**Deductible applies to the first service received*

***Please submit claims within 90 days of the date of service so that the plan can consider benefits (subject to State requirements).*

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. When your dental visit is to an Ameritas network provider, you earn an extra \$100 PPO Bonus. 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.

LASIK Advantage

Your dental plan includes a feature called LASIK Advantage which provides benefits for LASIK and related procedures, including standard LASIK, custom LASIK, LASIK with Wavefront Technology, CustomVue LASIK, LASIK with IntraLase technology and Photorefractive Keratectomy (PRK).

As a participant in the dental plan you earn a lifetime LASIK benefit per eye over time. The benefit amount increases over a four year period, with the highest benefit provided in year four. Benefits are earned for each eye.

If you and/or your eligible dependents are late entrants as described above, you and/or your eligible dependents must wait 12 months from enrollment to be eligible for LASIK coverage; after 12 months the LASIK benefit starts at the year one amount.

The LASIK Advantage benefit is available to participants age 18 and older.

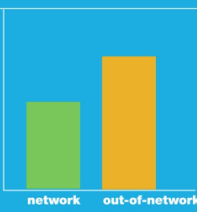
This benefit offers choice! Any specialist can be chosen, as there is no network tied to this coverage.

Lifetime Benefit Earned per Eye:	Year One	Year Two	Year Three	Year Four
	\$175	\$175	\$350	\$350

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.

Ameritas dental network savings




average cost per procedure

network dentist out-of-network dentist

Network dentists typically charge up to 30% below average for their region

30%



The Ameritas dental network is one of the **5 largest networks** in the nation for access points. Source: NetMinder 2016

Ameritas Network: These plans give you more than 428,000 access points across the nation for dental care.

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.

Member Savings

Prescription savings

Just for participating in our dental, vision or hearing care plans, members can save big on prescription medications through one of the world's largest retailers. **No additional cost. Only savings.**

Extra Value

Our plan members, their covered dependents can **save on prescription medications at over 60,000 pharmacies across the nation** including CVS, Walgreens, Rite Aid and Walmart. This Rx discount is offered at no additional cost, and it is not insurance.

Participating pharmacies will give Ameritas plan members their normal health care pharmacy benefit, or the prescription discount, whichever saves them more. Even if the employees already have health insurance pharmacy benefits, they are welcome to check out this Rx discount.

Find a pharmacy near you – <http://www.emsmed.com/vendors/pharmacy.aspx>

Look up a price – <http://www.emsmed.com/vendors/rxpricing.aspx?groupid=Ameritas>

Rx Savings

Members can receive up to 65% savings on generic prescriptions, and overall average savings of 40% across brand name and generic prescription combined.



Save on frames and lenses

Save up to 10% off eyewear frames and lenses purchased at any Walmart Vision Center nationwide. This is available to you without any additional cost to your plan premium.

You may receive savings on the following vision care products at Walmart Vision Centers:



- **top quality frames** for the entire family including today's most popular brands.



- **wide selection of lens options**; all lenses come with scratch resistant coating for no additional charge.



- **safety eyewear.**

Guarantees

Walmart Vision Centers stand behind their products and workmanship by offering:

- 60-day frame and lens satisfaction guarantee.
- 12-month replacement guarantee on broken or damaged frames or lenses.
- lifetime adjustments and cleanings.

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.