ASA HEALTHCARE SOLUTIONS

Policy #: 010-50413



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.

The member can use up to \$150 toward any covered eye care expense.

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%	
	Surgical Extractions	
	Restorative Amalgams	
	Restorative Composites	
	Endodontics (nonsurgical)	
	Periodontics (nonsurgical)	
	Endodontics (surgical)	
	Periodontics (surgical)	
	Simple Extractions	
Type 3 Major No Waiting Period	50%	
	Crowns (1 in 5 years per tooth)	
	Prosthodontics (Bridges, Dentures) (1 in 5 years)	
Deductible		
Type 1	\$0	
Type 2 and 3 Family Maximum	\$50 per person, per calendar year \$150 per Benefit Period	
	ψ100 per Deficit Friod	
Benefit Year Maximum		
Type 1, 2, and 3 (per person, per calendar year)	\$1,000	
(per person, per carendar year)		
Claims Allowance		
Type 1, 2 and 3	90th U&C	
In network allowance is discounted fee		
Monthly Rates		
Employee only	\$39.08	
Employee & Spouse Employee & Child(ren)	\$78.32 \$88.56	
Employee & Child(ren)	\$127.80	
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Rates are effective from 3/1/2019 to 3/1/2020.



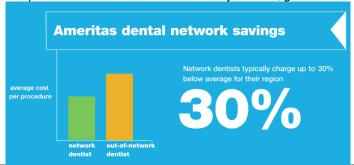
Vision Plan Benefits subject to FUSION plan design listed above

	Allowances	Frequencies Based on date of service**	
Exam	Subject to Maximum	Exam	None
Lenses (per pair)		Lenses	None
Single	Subject to Maximum	Frames	None
Bifocal	Subject to Maximum		
Trifocal	Subject to Maximum		0.450
Lenticular	Subject to Maximum	Maximum	\$150
Progressive	Subject to Maximum	Deductibles (Lifetime deductible)	\$0
Contacts			
Elective/Medically Necessary	Subject to Maximum		
Frames	Subject to Maximum		

^{*}Deductible applies to the first service received

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.





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

Prescriptions



Save an average of 40% on generic and brand name prescriptions at over 60,000 pharmacies including CVS, Walgreens, Rite Aid and Walmart. Use your normal health care pharmacy benefit, or the prescription discount,

whichever saves you more. This Rx discount is offered at no additional cost, and it is not insurance.

Access your Ameritas Rx savings card:

https://www.ameritas.com/OCM/GetFile?doc=037275

Frames and lenses

Save up to 15% at any Walmart Vision Center:



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



 wide selection of lens options; all lenses come with scratch resistent coating for no additional charge



safety eyewear

This discount is available to you without any additional cost to your plan premium.

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.

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