PrimeStar® Dental Plans

Individual dental insurance – WA

Plan features

- Year 2 and 3 increased Basic (Type 2) benefits
- Child orthodontia

Find a dentist at ameritas.com

Policyholders can choose any dentist, and the out-of-pocket savings are best when visiting a network provider. Go to Find a Health Provider and select a Classic (PPO) network provider.

Effective date 4/1/2026

	Advantage Plus Network 1000		Advantage Plus Network 2000		Advantage Plus 1000		Advantage Plus 2000	
	The PrimeStar Advantage Plus Network plans are designed for those who will visit an Ameritas Dental Network provider.				All PrimeStar plans allow policyholders to choose any dentist and Advantage Plus includes the best benefits for those visiting an out-of-network dentist.			
Plan details	Day one	After year one	Day one	After year one	Day one	After year one	Day one	After year one
Dental maximum benefit *Per person per calendar year for Preventive, Basic and Major services combined*	$1,000		$2,000		$1,000		$2,000	
Deductible *Per person for Preventive, Basic and Major services combined, with a maximum of three deductibles per family*	$50				$50			
Preventive *(Type 1)* *Applies to:* *Exams (2 per year), cleanings (2 per year), bitewing X-rays, fluoride and sealants (age 15 & under)*	100%				100%			
Basic *(Type 2)* *Applies to:* *Fillings, simple extractions*	50% day 1	65% after year 1 80% after year 2	50% day 1	65% after year 1 80% after year 2	50% day 1	65% after year 1 80% after year 2	50% day 1	65% after year 1 80% after year 2
Major *(Type 3)* *Applies to:* *Implants, oral surgery, root canals, periodontics, crowns, bridges, dentures, panoramic X-rays*	50% after 6 months		50% after 6 months		50% after 6 months		50% after 6 months	
Child orthodontia *Under age 19* *Lifetime maximum per person*	50% after 12 months $1,000		50% after 12 months $1,000		50% after 12 months $1,000		50% after 12 months $1,000	

MAC/MAB available with Advantage Plus Network plans.
U&C available with Advantage Plus plans.

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Plan feature descriptions

Child orthodontia benefit

The orthodontia benefit is a lifetime benefit for dependent children up to age 19. Plan payments are pro-rated by monthly periods over the length of the program. Orthodontic services can help straighten teeth, close gaps, correct bite problems, and correct teeth and jaw alignment.

Network information

The Ameritas Dental Network is one of the largest in the nation, making it easier for members across the country to see the dentist of their choice. The network offers access to providers in the U.S. and Mexico.

- 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.

Mobile app access

With the **Ameritas Benefits** mobile app, policyholders can easily search for providers, view dental benefits, processed claims, and ID cards, once benefits are active. Access also includes vision benefit information.

Plan information

MAC/MAB claim allowance

(Advantage Plus Network)

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.

U&C claim allowance

(Advantage Plus)

If a policyholder visits an out-of-network dentist, covered benefits are paid at the 80th percentile of usual and customary (80th U&C) charges. This means we expect 8 out of 10 charges from dental providers to be within the amount insurance pays for a covered procedure. Policyholders pay the difference between what the plan pays and the dentist's actual charge. If they visit a network provider, payments are based on the dentist's contracted fees (MAC/maximum allowable charge), which may result in lower out-of-pocket costs.

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 account, 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, limitations and exclusions. Certain plans and plan options may not be available in all areas.

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