



Policyholder's Name

Dental Benefits

You have two plans to choose from, both are easy to understand and use, and they save you money!

Benefit overview	Standard plan	Premier plan
Type 1		100%
Type 2		80%
Type 3		50%
Dental implants	No coverage	Covered
Deductible		\$0 in-network \$25 out-of-network
Annual dental maximum	\$1,500	\$2,500
Orthodontia		Adult & child coverage
Lifetime ortho maximum	\$1,500	\$2,500

Select the plan that's right for you.

Both plans:

- feature no deductible in-network.
- include adult and child orthodontia coverage.
- include Dental Rewards®. By visiting a dental provider each year and submitting a claim, you can qualify to carry over benefit rewards and increase your available dental insurance benefits.

The Premier plan:

- provides Major, Type 3, coverage for dental implants.
- features a higher annual maximum.
- includes a higher lifetime maximum for orthodontia.



To view the full plan comparison details and out-of-pocket cost examples, scan the QR code to access your [dental plan video](#).

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Vision Coverage With Added Value

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Vision insurance can be just as important to a lifetime of good health as your medical plan. This easy-to-use vision reimbursement plan has no provider network, so you'll receive the same benefits with all vision providers. Simply pay your provider, save your itemized receipt, and submit a claim online.

Your vision plan options

	Low Plan	High Plan
Maximum benefit Per person per calendar year	\$300	\$500
Deductible	\$0	\$0
LASIK lifetime benefit Both eyes	\$350 year 1 \$350 year 2 \$700 year 3	\$350 year 1 \$350 year 2 \$700 year 3

Plans include:

LASIK benefits.

Your benefits cover up to \$700 in vision expenses and make LASIK vision correction more affordable.

Hearing savings.

With Great Hearing Benefits, your discounts can help pay for the costs of hearing exams and hearing aids.

Vision savings.

Members save on exams, frames, eyeglass lenses and contact lenses when visiting EyeMed providers.



Learn more about your plan details. Scan the QR code to watch your [vision plan video](#).

Need to submit a claim?

Upload images of your completed claim form and receipt in your member account. Need help? Watch this [short video](#) on how to submit a claim.



Cobertura oftalmológica con valor agregado

POLICYHOLDER'S LOGO

El seguro oftalmológico es igual de importante en su vida que el seguro médico para tener una buena salud. El plan de reembolso oftalmológico es fácil de usar y no tiene una red de proveedores. Usted recibirá los mismos beneficios con cualquier especialista oftalmológico. Simplemente pague a su proveedor, guarde su recibo con desglose y envíe el reclamo en línea.

Sus opciones de planes oftalmológicos		
	Plan Básico (Low)	Plan Superior (High)
Máximo de beneficios Por persona, por año calendario	\$300	\$500
Deducible	\$0	\$0
Beneficios LASIK de por vida Both eyes	\$350 año 1 \$350 año 2 \$700 año 3	\$350 año 1 \$350 año 2 \$700 año 3

Los planes incluyen:

Beneficios para LASIK.

Sus beneficios tienen una cobertura de hasta \$700 dólares para gastos oftalmológicos, lo cual hace que la corrección de la visión LASIK sea más fácil de pagar.

Ahorros en audición.

Los descuentos que ofrece Great Hearing Benefits le ayudarán a pagar el costo de exámenes de la audición y de dispositivos auditivos.

Ahorros en servicios de la visión.

Si los miembros del plan acuden a proveedores EyeMed podrán ahorrar en exámenes, armazones, lentes para anteojos y lentes de contacto



Obtén más información sobre tu plan. Escanea el código QR para ver el [video de tus beneficios de visión.](#)

¿Necesita enviar un reclamo?

Suba al sistema sus formularios de reclamos completos y recibos. Para ello, ingrese a su cuenta en línea para miembros del plan. ¿Necesita ayuda? [Este video](#) le muestra los pasos para enviar un reclamo.



Dental and Vision Benefits

Find out what dental and vision benefits can do for you and your family.



Dental plan options

Your dental benefits are easy to understand and use, and they save you money. You have two plans to choose from.

Plan Benefit	Basic Dental Plan Summary	Enhanced Dental Plan Summary
Preventive, Type 1		100%
Basic, Type 2	70%	80%
Major, Type 3		50%
Deductible	50 per Calendar Year; Waived Type 1; \$150/family max	
Maximum (per person)	\$1,000	\$2,000
Orthodontia	No coverage	Adult & Child Coverage

Plan advantages



Both plans cover 100% of preventive dental visits.



The Enhanced plan has a higher yearly maximum and offers adult and child orthodontia.



With both plans, if you visit an in-network provider your out-of-pocket costs can be lower because network providers have agreed to charge 25-50% less than their regular rates.



Ameritas offers money-saving discounts to help with hearing, prescription and eyewear expenses.



To view the full plan comparison details, out-of-pocket cost examples and see if your dentist is in the Ameritas Classic and Plus Network, scan the QR code to access your [plan benefit site](#).

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You have two vision networks to choose from, VSP and EyeMed. These vision plans help you save money and maintain healthy eyes and sharper vision. To decide which plan is right for you, first search for your provider or retail location at eyemed.com and vsp.com.

Vision				
	Plan 1		Plan 2	
	VSP Choice Network + Affiliates	Out-of-network	EyeMed Insight Network	Out-of-network
Annual eye exam	100%	Up to \$45	100%	Up to \$35
Deductible Per person per calendar year	\$10 Exam \$25 Eyeglass lenses or frames*	\$10 Exam \$25 Eyeglass lenses or frames	\$10 Exam \$25 Eyeglass lenses or frames	None
Frames	\$130**	Up to \$70	\$130	Up to \$65
Contacts Fit & Follow-up	Member cost up to \$60	None	Standard: Member cost up to \$40 Premium: 10% off of retail	None None
Elective	Up to \$130	Up to \$105	Up to \$130	Up to \$104
Medically necessary	100%	Up to \$210	100%	Up to \$200

*Deductible applies to a complete pair of glasses or to frames, whichever is selected.

**The Costco and Walmart allowance will be the wholesale equivalent.

Plan advantages



VSP retailers include Costco Optical¹, Sam's Club, Visionworks, Pearle Vision, Walmart and Eyeconic.



EyeMed retailers include LensCrafters, Pearle Vision, Target Optical, Glasses.com and Contacts Direct.

¹Not all providers at Costco locations are VSP providers. Please verify that your provider is in the VSP network before seeking services.



To view the full plan comparison details, out-of-pocket cost examples and network, information, scan the QR code to access your [plan benefit site](#).

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