Policy #: 026-301536



Ameritas Life Insurance Corp. of New York

Dental Plan Benefits

	In-Network	Out-of-Network
Type 1 Preventive No Waiting Period	100%	80%
	Routine Exam (1 per 6 months)	Routine Exam (1 per 6 months)
	Bitewing X-rays (1 per 6 months)	Bitewing X-rays (1 per 6 months)
	Cleaning (1 per 6 months)	Cleaning (1 per 6 months)
Type 2 Basic No Waiting Period	90%	80%
	Surgical Extractions	Surgical Extractions
	Restorative Amalgams	Restorative Amalgams
	Restorative Composites	Restorative Composites
	Endodontics (nonsurgical)	Endodontics (nonsurgical)
	Periodontics (nonsurgical)	Periodontics (nonsurgical)
	Endodontics (surgical)	Endodontics (surgical)
	Periodontics (surgical)	Periodontics (surgical)
	Simple Extractions	Simple Extractions
Type 3 Major No Waiting Period	65%	60%
	Crowns (1 in 5 years per tooth)	Crowns (1 in 5 years per tooth)
	Prosthodontics (Bridges, Dentures) (1 in 5 years)	Prosthodontics (Bridges, Dentures) (1 in 5 years)
Deductible		
Type 1, 2 and 3	\$0	\$50 per person, per calendar year
Family Maximum	No family maximum	\$100 per Calendar Year
Benefit Year Maximum		
Type 1, 2, and 3	\$2,000	\$2,000
(per person, per calendar year)	ψ2,000	ψ2,000
Orthodontia Benefits (adult ortho included)		
No waiting period		
Plan Benefit	50%	50%
Lifetime Deductible Lifetime Maximum (per person)	\$0 \$750	\$0 \$750
	\$100	ψι σσ
Claims Allowance Type 1, 2 and 3	¢100	85th U&C

FRANKLIN SQUARE UFSD-NON INSTRUCTIONAL

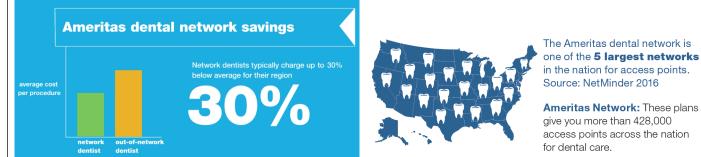
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Ameritas Life Insurance Corp. of New York

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.

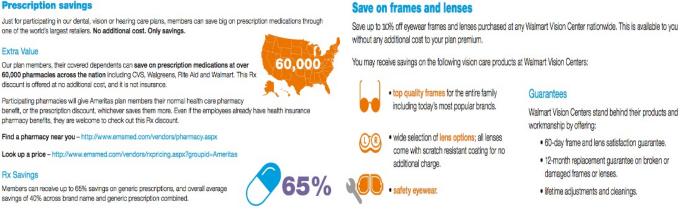


Late Entrant

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 6 months that a person is insured, if the person is a Late Entrant, except for Type 1 procedures. Type 3 procedures are not covered for 24 months.

Member Savings

Prescription savings



Customer Service

Customer Connections 800-659-5556 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. of New York 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.