Ameritas Life Insurance Corp. P.O. Box 82520 Lincoln, NE 68501-2520

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Your dental coverage ID cards have arrived!

Carefully remove them from this sheet (below) and take one with you to your next dental appointment.

Welcome

Get direct access to online benefit information by

- 1. Visiting Ameritas.com
- 2. Selecting Sign In in the upper right corner
- 3. Choosing the Dental/Vision/Hearing section
- 4. Signing into the secure member account using the ID number below

In your secure member account, you can access:

- Your Explanation of Benefits (Go Paperless! Sign-up online to receive your EOBs electronically.)
- · Your dental Benefit Summary and Pretreatment Estimates
- · Pending and paid claims, status of plan maximums, and deductibles
- Your ID card
- Your Certificate of Coverage
- For answers to your **dental benefit coverage questions**, check out our Frequently Asked Questions on Ameritas.com under the Resource Center. You can also contact our customer relations team at **800-487-5553** Monday through Thursday from 7 a.m. to midnight and Friday from 7 a.m. to 6:30 p.m. Central Time.
- To get the most current and complete **Dental Network** directory, visit **Ameritas.com**, select Find a Provider at the top of the page, then select **Dental**, in your search choose your network, visible on your card below, or call **800-487-5553**.
- You have freedom to select the provider of your choice. If you visit one of our network providers, you may reduce your out-of-pocket expenses because our providers agree to discounted fees.
- For dental or vision services outside the USA, call AXA Assistance USA, Inc. (AXA) at 1-866-662-2731 (toll free) or 1-312-935-3727 (collect call) for a referral. Providers referred by AXA are not members of the Ameritas Life Insurance Corp. (Ameritas) Network. Referral to an AXA provider is not a guarantee of benefits, and all policy provisions and limitations apply. Note: These provider referral assistance services are independently offered and administered by AXA. Ameritas and its affiliates and subsidiaries do not participate in the selection of these dental and vision service providers and do not oversee or monitor AXA's performance of these services. Additionally, Ameritas does not warrant or guarantee or make any representation as to the quality of the services provided by AXA or by any dental or vision service provider referred by AXA.

AMERITAS DENTAL NETWORK



ABC COMPANY Plan # 00-00000-00 Certificate # 00 JOHN SMITH

Dependent Coverage No **Member ID #** 000000000

For benefit or services information or to express concerns about our services, call Ameritas at 800-487-5553 or visit us online at Ameritas.com.

AMERITAS DENTAL NETWORK

Ameritas Group Dental Claims
P.O. Box 82520
Lincoln, NE 68501-2520
Principal*

ABC COMPANY Plan # 00-000000-0000 Certificate # 00000 JOHN SMITH

Dependent Coverage No **Member ID #** 000000000

For benefit or services information or to express concerns about our services, call Ameritas at 800-487-5553 or visit us online at Ameritas.com.

Our customers come first.

And second. And third.

Always.

We want you to know

that we're here for you,

and we'll do everything we can

to answer your group dental

benefits questions.

Thank you

- We are committed to providing you with high-quality, cost effective dental benefits and we truly value your participation. We continually monitor member satisfaction through an internal quality improvement program.
- Member satisfaction is our number one priority, so if for any reason you have a concern about your current dental benefits, please contact us. There's a formal grievance and appeal process in place for your protection should you choose to use it.

Select the dentist of your choice. To help reduce out-of-pocket expenses you can visit a network provider.

- Present this card at your appointment.
- Visit us online at Ameritas.com for a current list of network providers and claim forms. Visit your secure member account to see your benefit and claim status information, and you can go paperless for your EOBs.
- Claim forms may also be obtained from your plan administrator, and we will also accept your provider's claim form or super bill.
- You or your provider may mail the completed claim form to Group Claims, P.O. Box 82520, Lincoln, NE 68501-2520. Fax it to 402-467-7336. For electronic submittal, please use Payor #47009.
- If visiting a network provider, your benefits will be paid directly to that provider.

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