Dental RewardsSM



first in the industry... A plan that rewards insureds who visit the dentist and use only a portion of their annual maximum benefit in a year. With its increasing annual maximum feature, each insured employee and dependent earns additional money toward his/her next year's annual maximum.

- Insureds qualify by each filing a dental claim yearly and not exceeding the plan's annual threshold amount.
- Helps insureds build their annual max amount toward future covered dental procedures.

Annual Maximum for Preventive, Basic and Major Procedures ...\$1,000
Annual Benefit Threshold (not exceeding this amount)\$500
Annual Carry Over/Reward Toward Next Benefit Year\$250
Next Benefit Year's Annual Max Plus Carry Over/Reward\$1,250

Maximum Carry Over/Reward is \$1,000 (additional accumulation toward annual maximum).

After the first Benefit Period following the effective date of this plan, the Maximum Amount Per Insured Person as shown may be increased by the Carry Over Amount if:

- a) The Insured Person has submitted a claim for dental expenses incurred the preceding Benefit Period, and
- b) The benefits paid for dental expenses incurred in the preceding Benefit Period did not exceed the Benefit Threshold.

In each succeeding Benefit Period in which the total dental expenses benefits paid do not exceed the Benefit Threshold, the Insured Person will be eligible for the Carry Over Amount.

The Carry Over Amount can be accumulated from one Benefit Period to the next up to the Maximum Carry Over amount, unless:

- a) During any Benefit Period, dental expense benefits are paid in excess of the Benefit Threshold. In this instance, there will be no additional Carry Over Amount for that Benefit Period, or
- b) During any Benefit Period, no claims for dental expenses incurred during the preceding Benefit Period are submitted. In this instance, there will be no Carry Over Amount for that Benefit Period, and any accumulated Carry Over Amounts from previous Benefit Periods will be forfeited.

Eligibility for the Carry Over Amount will be established or reestablished at the time the first claim in a Benefit Period is received for dental expenses incurred during that Benefit Period.

To properly calculate the Carry Over Amount, claims should be submitted timely in accordance with the Proof of Loss provision found within the General Provisions Section of the Certificate of Insurance. You have the right to request review of prior Carry Over Amount calculations. The request for review must be within 24 months from the date the Carry Over Amount was established.



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