

## Benefit Comparison and Rates for 1-500 Employees

BENEFIT SUMMARY   VOLUNTARY AMERITAS DENTAL PLANS				
PPO PLAN 1000			PPO PLAN 1250	
Network	IN NETWORK	OUT OF NETWORK	IN NETWORK	OUT OF NETWORK
<b>Deductible</b>				
Individual	\$50	Combined with PPO	\$50	Combined with PPO
Family	3/Family	Combined with PPO	3/Family	Combined with PPO
Waived for Preventative	Yes	Yes	Yes	Yes
<b>Eligibility</b>				
Group Size Dental Services	1-500 enrolled	1-500 enrolled	1-500 enrolled	1-500 enrolled
<b>Waiting Periods</b>				
Major	12 months <sup>1</sup>	12 months <sup>1</sup>	12 months <sup>1</sup>	12 months <sup>1</sup>
Waived for Major (if there was prior group coverage)	Yes	Yes	Yes	Yes
<b>Dental Services</b>				
Preventive Care	Plan pays based on a Maximum Covered Expense schedule. Member is responsible for costs in excess of covered expenses.		Plan pays based on a Maximum Covered Expense schedule. Member is responsible for costs in excess of covered expenses.	
Basic Services				
Major Services (after 12-month waiting period) <sup>1</sup>				
Periodontal Surgery	See schedule	See schedule	See schedule	See schedule
Endodontic Surgery	See schedule	See schedule	See schedule	See schedule
Orthodontics	Not Covered	Not Covered	Not Covered	Not Covered

## Benefit Comparison and Rates for 1-500 Employees

BENEFIT SUMMARY   VOLUNTARY AMERITAS DENTAL PLANS				
PPO PLAN 1000			PPO PLAN 1250	
Network	IN NETWORK	OUT OF NETWORK	IN NETWORK	OUT OF NETWORK
Benefit Maximums				
Annual Benefit Maximum	\$1,000	Combined with PPO	\$1,250	Combined with PPO
Voluntary Dental Rates <sup>2</sup> — A \$15 monthly administration fee applies to all groups.				
Employee Only	\$33.73		\$48.29	
Employee +1	\$60.71		\$89.40	
Employee +2 or more	\$93.54		\$147.81	

<sup>1</sup> The waiting period for Type 3 Major Services is 12 months for new group business and for new hires to existing groups. The 12-month Major Services waiting period can be waived for new group enrollment and new hires upon proof of 12 months of continuous prior dental coverage.

<sup>2</sup> Ameritas Voluntary Dental plans are available to groups headquartered in any of the following states: AZ, CA, NV, UT. The groups' employees can live in any of the 50 states, excluding FL.

SIC code is required. Certain industries are ineligible to purchase these plans, such as: Dental Offices 8021, Dental Labs 8071, Medical Labs 8072, and Seasonal Employees, Part-time help and groups without an SIC.

The summary above is meant to be a brief description of plan benefits and rates only. This is not a policy. For a complete description of benefits, exclusions, limitations and participation requirements, please consult the contract and/or evidence of coverage and disclosure brochure. Either of these is available upon request. The accuracy of this summary is not guaranteed and the information herein is subject to change without notice. This is not an offer of coverage.

\* Rates are subject to change. Check with Inshore Benefits for the most current benefits and rates for your requested effective date.