



At work for you.

ASBA has partnered with your agent to bring you exclusive member-only discounts and benefits.

The American Senior Benefits Association (ASBA) has over 30 years of experience serving Americans age 50 and up. ASBA is a non-political, national 501(c)(3) charitable organization focused on education, member benefits and supporting worthy causes.

ASBA has over 700,000 members today, and continues to grow.

What makes ASBA exceptionally unique, is that ASBA is FREE TO JOIN. ASBA does not charge membership fees



Benefits

ASBA offers more than 100 member programs. Our members can take advantage of dental, vision, life, health, long term care, short term care, medicare supplement insurance and more. ASBA works with partners who represent best-in-class benefit providers and insurance companies at highly competitive pricing. ASBA also offers great shopping, dining and travel programs. The ASBA programs are always being enhanced to deliver an exceptional member experience.

Charitable Efforts

ASBA has donated millions over the years to worthy causes. Most recently, ASBA has focused on rare diseases affecting children. **We have been honored to be able to give over \$2 Million dollars over the last 10 years to Cystic Fibrosis, Kidz1st Fund (fighting fanconi Anemia), Autism Speaks, and more through our annual charity event, the Hill Country Classic.** We are always looking for more ways to give back.

Education

In addition to our charitable efforts, ASBA also focuses on education. **ASBA has given away thousands of dollars in college scholarship grants to members' children and grandchildren through our college scholarship program found [here](#).** ASBA also offers educational content through our website, www.asbaonline.org, so that our members have access to news and information that can help guide them through life's many stages. Topics on health, wealth, wellness and lifestyle are continuously being shared.

The ASBA® 360 Plus Benefit Package- exclusively for members!



This exceptional benefit package is immediately available to you when you enroll in the ASBA 360 Plus Benefit plan.

Dental and Vision Benefits¹

Take advantage of these dental and vision benefits offered through Ameritas! Members can see any dentist they want, and there is no waiting period. **You will have immediate access to over 100 Basic and Restorative dental procedures** like cleanings, x-rays and fillings (Type 3 services have a 6-month waiting period).

Your vision coverage allows you to spend up to a maximum of \$200 (of your total dental/vision maximum) for eyeglasses, contacts, routine exams and more!*

| 844-345-6345 | asbaonline.org

Telemedicine²

Members receive 24/7/365 access to doctors, via phone or video chat, to address common illnesses like colds, flu, rashes and more. When medically appropriate, a DialCare doctor may prescribe a short-term, non-DEA controlled medication for the member. A consult fee of \$45 applies to telemedicine consults.

Through DialCare Mental Wellness, members can also talk to licensed counselors, who can assist with depression, anxiety, grief, relationship problems and more. A consult fee of \$95 applies to counselor consults. Sessions are available by appointment 7 a.m. to 10 p.m. seven days a week and last for 30 minutes.

| 844-442-5622 |

Prescription Discounts²

Members have access to prescription drug savings that can be between **15% to 60%** off the retail price of generic drugs and **10% to 25%** off the retail price of brand name drugs at over **68,000** participating pharmacies nationwide.

| 844-442-5622 |

QualityCare Connect

ASBA is offering it's members FREE orthopaedic specialist matching! The number one specialist that those age 50+ seek are orthopaedic specialists. Lots of time and money can be lost waiting to see a referred specialist, only to find out that they are not the right fit for the medical condition needing treatment. QualityCare Connect is a program that quickly connects you with the ideal specialist for your exact orthopaedic needs. *Take advantage of this FREE BENEFIT today, or upgrade for all medical conditions starting at \$3.95/month.*

| 888-302-5735 | my.armadahealth.com/asba




Travel, Dining, Shopping and Entertainment Discounts

Your membership gives you even more value. Explore **thousands of savings opportunities** on dining, event tickets, clothes, health, travel and many other discounts nationwide!

Discounts Include:

Rental Car Discounts
Cruise & Vacation Benefits
Orlando Employee Discounts
1-800-FLOWERS
Computer Discounts
Trip Beat Vacation Discounts

| 800-410-4211 | myambadiscounts.com | code: **ambasavers**

360 PLUS BENEFIT PACKAGE MONTHLY RATES		
Member		\$38.43
Member & Spouse or Dependent		\$61.93
Member & Family		\$87.97

THIS BENEFIT PACKAGE IS AVAILABLE TO AMERICAN SENIOR BENEFITS ASSOCIATION MEMBERS ONLY CONTACT YOUR AGENT TODAY TO JOIN

¹ Endorsed by: American Senior Benefits Association. Underwritten by: Ameritas Life Insurance Corp. Plans Marketed by: Association Member Benefits Advisors Austin, TX 78730. Reimbursement percentages are based on the maximum plan allowance charges for services in your geographical area. All services are subject to limitations and exclusions.

² THIS PLAN IS NOT INSURANCE and is not intended to replace health insurance. This plan does not meet the minimum creditable coverage requirements under M.G.L. c.111M and 956 CMR 5.00. This plan is not a Qualified Health Plan under the Affordable Care Act. This is not a Medicare prescription drug plan. The range of discounts will vary depending on the type of provider and service. The plan does not pay providers directly. Plan members must pay for all services but will receive a discount from participating providers. The list of participating providers is at www.careingtonrxcard.com. A written list of participating providers is available upon request. You may cancel within the first 30 days after effective date or receipt of membership materials (whichever is later) and receive a full refund. Discount Plan Organization and administrator: Careington International Corporation, 7400 Gaylord Parkway, Frisco, TX 75034; phone 800-441-0380. This plan is not available in Vermont or Washington.

Only available to AMERICAN SENIOR BENEFITS ASSOCIATION Members

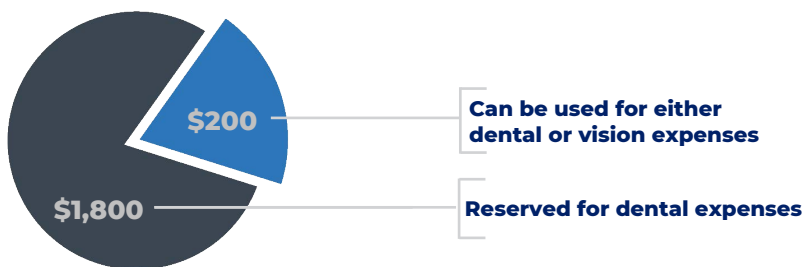


Take a look at your ASBA benefits...

ASBA members have the flexibility to choose how they spend a shared portion of their annual maximum. Members can use their entire maximum for dental care, or use up to the shared dental/vision maximum on eye exams, glasses or contacts and the remainder on dental expenses. Benefits cannot exceed the full annual dental maximum. If more than \$1,800 is spent on dental, the vision allowance is reduced to the difference between accrued maximum amount and \$2,000.

A Sampling of Dental Benefits	
What the plan pays	In-Network*/Out-of-Network
Type 1: Routine cleanings, routine oral exams & x-rays	100%
Type 2: Fillings & denture repair	Denture Repair (Maxillary) - \$53 Fillings (2 surface amalgam) - \$51 Fillings (2 surface resin) - \$61
Type 3: Root canals, gum disease, crowns, dentures, oral surgery & general anesthesia	General Anesthesia - \$35 Crown (Full cast noble metal) - \$270 Root Canal (Molar) - \$302 Denture (Maxillary) - \$302
Deductible	\$20 Per Visit

Vision benefits available with plan	
Benefit	Flat Maximum
Annual Eye Exam Eyeglass frames/lenses Contacts lenses	subject to \$200 maximum



Total Plan Annual Maximum (per person) \$2,000

Using your dental benefits is pain free!

See any dentist. Your Ameritas dental plan allows you and your family members to receive care from any licensed dental provider, regardless if they are in- or out-of-network. You do not need to switch providers. Family members do not need to see the same dentist.

Immediate Access to over 100 Basic and Restorative Dental Procedures. There are no waiting periods for Type 1 or Type 2 services. Once your plan is effective you can use the benefits on or after that effective date (Note: Type 3 services have a 6-month waiting period).

Know whats covered. As a smart consumer, it's best for you to know your share of the cost up front. For services over \$200 we recommend you ask your dentist to request a pretreatment estimate from our customer relations department. You will receive a written response showing what Ameritas estimates your dental plan will pay, and the amount that you will be responsible for.

This plan also includes Vision benefits!

Exam, contacts, lenses and frames covered 100% up to a maximum of \$200 per year

Visit the vision provider of your choice and submit a claim within 90 days for reimbursement

No vision network- take advantage of special pricing offers from any vision provider

These charts show just a sampling of the benefits covered. Your plan will provide you paid benefits for over 350 Dental procedures. *You and your family members may visit any licensed dentist. However, in most cases you will receive the greatest out of pocket savings if you see an in-network PPO provider. When choosing to see an out- of- network provider, you will likely pay the highest out-of-pocket expenses and be balanced billed. Rates are guaranteed through June 2021.



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DENTAL LIMITATIONS

Covered Expenses will not include and benefits will not be payable for expenses incurred:

1. for initial placement of any prosthetic crown, appliance, or fixed partial denture unless such placement is needed because of the extraction of one or more teeth while the insured person is covered under this contract. But the extraction of a third molar (wisdom tooth) will not qualify under the above. Any such prosthetic crown, appliance, or fixed partial denture must include the replacement of the extracted tooth or teeth.
2. for appliances, restorations, or procedures to:
 - a. alter vertical dimension;
 - b. restore or maintain occlusion; or
 - c. splint or replace tooth structure lost as a result of abrasion or attrition.
3. for any procedure begun after the insured person's insurance under this contract terminates; or for any prosthetic dental appliances installed or delivered more than 90 days after the Insured's insurance under this contract terminates.
4. to replace lost or stolen appliances.
5. for any treatment which is for cosmetic purposes.
6. for any procedure not shown in the Table of Dental Procedures. (There may be additional frequencies and limitations that apply, please see the Table of Dental Procedures for details.)
7. for orthodontic treatment under this benefit provision. (If orthodontic expense benefits have been included in this policy, please refer to the Schedule of Benefits and Orthodontic Expense Benefits provision found on 9260).
8. for which the Insured person is entitled to benefits under any workmen's compensation or similar law, or charges for services or supplies received as a result of any dental condition caused or contributed to by an injury or sickness arising out of or in the course of any employment for wage or profit.
9. for charges which the Insured person is not liable or which would not have been made had no insurance been in force.
10. for services that are not required for necessary care and treatment or are not within the generally accepted parameters of care.
11. because of war or any act of war, declared or not, while serving in the Armed Forces.

VISION LIMITATIONS

Covered expenses will not include and no benefits will be payable for:

- Vision examinations, lenses and frames more than the frequency as indicated on the plan summary page.
- Examinations performed or frames or lenses ordered before the Insured was covered under this section.
- Any examination performed, or frame or lens ordered after the Insured's coverage under this section ceases, subject to Extension of Benefits.
- Sub-normal vision aids; orthoptic or vision training or any associated testing.
- Non-prescription lenses.
- Replacement or repair of lost or broken lenses or frames except at normal intervals.
- Any eye examination or corrective eye wear required by an employer as a condition of employment.
- Medical or surgical treatment of the eyes.
- Any service or supply not shown on the Schedule of Eye Care Services.
- Coated lenses; oversize lenses (exceeding 71 mm); photo-gray lenses; polished edges; UV-400 coating and facets, and tints other than solid.
- Lenses and frames during the first twelve months that a person is insured under this section, when the person is a Late Entrant, as defined.

