AMERITAS DENTAL NETWORK

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



VANTEC HITACHI TRANSPORT SYSTEM (USA), Plan # 10-301684-1 Dependent Coverage Yes Certificate # 761 DAI AKASHI

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

select the dentist of your choice

visit a network provider to help reduce out-of-pocket expenses

- visit us online at ameritas.com for a current list of network providers, also find claim forms, benefit and claim status information, plus much more
- claim forms also may be obtained from your planholder, and we will also accept your provider's claim form or super bill
- present this card at your appointment
- 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