

Dental Benefit Summary
Group Number: 00542044

A Dental insurance plan through Guardian:

- Provides coverage for key preventive services such as regular checkups and cleanings to keep you and your family healthy
- Helps offset potentially expensive dental procedures, such as crowns and fillings
- Gives you access to one of the nation's largest dental networks so care is convenient to you
- Makes it easy to find a high quality certified network dentist by accessing guardiananytime.com or Guardian's find a provider mobile app
- Fast and easy claim payments

About Your Benefits:

PPO plan, you'll have access to one of the largest networks of dentists with three reimbursement levels that give you more control over savings. You will always save money with any dentist in Guardian's network and when they belong to a tier in the Tier 1 reimbursement level you will maximize your savings. Reimbursement for covered services received from a non-contracted dentist will be based on Guardian's fee schedule.

Your Dental Plan	PPO		
	Tier 1	Tier 2	Tier 3
Your Network is DentalGuard Preferred	Platinum	Gold, Silver	Non-Contracted
Calendar year deductible	Tier 1	Tier 2	Tier 3
Individual	\$50	\$50	\$50
Family limit	3 per family (applies to all levels)		
Waived for	None	Preventive	Preventive
Charges covered for you (co-insurance)	Tier 1	Tier 2	Tier 3
Preventive Care	100%	100%	100%
Basic Care	100%	80%	80%
Major Care	60%	50%	50%
Orthodontia	50%	50%	50%
Annual Maximum Benefit	\$2000	\$1500	\$1500
	Combined Tier 1, 2 and 3 maximum of \$1500 with an additional \$500 of benefit for Tier 1.		
Maximum Rollover	Yes (applies to all levels)		
Rollover Threshold	\$700		
Rollover Amount	\$350		
Rollover Amount	\$500		
Rollover Account Limit	\$1250		
Lifetime Orthodontia Maximum	\$1000 (applies to all levels)		
Dependent Age Limits	26 (applies to all levels)		

A Sample of Services Covered by Your Plan:

		PPO Plan pays (on average)		
		Tier 1	Tier 2	Tier 3
Preventive Care	Cleaning (prophylaxis)	100%	100%	100%
	Frequency:	Once Every 6 Months (applies to all levels)		
	Fluoride Treatments	100%	100%	100%
	Limits:	Under Age 19 (applies to all tiers)		
	Oral Exams	100%	100%	100%
	Sealants (per tooth)	100%	100%	100%
	X-rays	100%	100%	100%
Basic Care	Fillings‡	100%	80%	80%
	Simple Extractions	100%	80%	80%
Major Care	Anesthesia*	60%	50%	50%
	Bridges and Dentures	60%	50%	50%
	Dental Implants	60%	50%	50%
	Inlays, Onlays, Veneers**	60%	50%	50%
	Perio Surgery	60%	50%	50%
	Periodontal Maintenance	60%	50%	50%
	Frequency:	Once Every 6 Months (applies to all levels)		
	Repair & Maintenance of Crowns, Bridges & Dentures	60%	50%	50%
	Root Canal	60%	50%	50%
	Scaling & Root Planing (per quadrant)	60%	50%	50%
	Single Crowns	60%	50%	50%
	Surgical Extractions	60%	50%	50%
Orthodontia	Orthodontia	50%	50%	50%
	Limits:	Child(ren) (applies to all levels)		
	Deferred Services for Future Employees	Orthodontia - 12 Months		

Guardian's Preferred Provider Organization consists of Dentists in the DentalGuard Preferred ("DGP") network. These tiers represent specific benefit levels as described in Your Schedule of Benefits. Network access varies by geographic location and zip code. Please visit www.GuardianAnytime.com to confirm your Dentist's tiered participation.

This is only a partial list of dental services. Your certificate of benefits will show exactly what is covered and excluded. **For PPO and or Indemnity members, Crowns, Inlays, Onlays and Labial Veneers are covered only when needed because of decay or injury or other pathology when the tooth cannot be restored with amalgam or composite filling material. When Orthodontia coverage is for "Child(ren)" only, the orthodontic appliance must be placed prior to the age limit set by your plan; If full-time status is required by your plan in order to remain insured after a certain age; then orthodontic maintenance may continue as long as full-time student status is maintained. If Orthodontia coverage is for "Adults and Child(ren)" this limitation does not apply. *General Anesthesia – restrictions apply. ‡For PPO and or Indemnity members, Fillings – restrictions may apply to composite fillings.

This document is a summary of the major features of the referenced insurance coverage. It is intended for illustrative purposes only and does not constitute a contract. The insurance plan documents, including the policy and certificate, comprise the contract for coverage. The full plan description, including the benefits and all terms, limitations and exclusions that apply will be contained in your insurance certificate. The plan documents are the final arbiter of coverage. Coverage terms may vary by state and actual sold plan. The premium amounts reflected in this summary are an approximation; if there is a discrepancy between this amount and the premium actually billed, the latter prevails.

Manage Your Benefits:

Go to www.GuardianAnytime.com to access secure information about your Guardian benefits including access to an image of your ID Card. Your on-line account will be set up within 30 days after your plan effective date..

Find A Dentist:

Visit www.GuardianAnytime.com
Click on "Find A Provider"; You will need to know your plan, which can be found on the first page of your dental benefit summary.