



# Dental insurance

Taking care of your teeth is about more than just covering cavities and cleanings. It also means accounting for more expensive dental work, and your overall health.

With dental insurance, routine preventive care can lead to better overall health. And you'll be able to save money if any extensive dental work is required.

## Who is it for?

Everyone should have access to great dental coverage, which is why we offer comprehensive plans that are available through employers as part of your benefit offerings.

## What does it cover?

Dental insurance helps to protect your overall oral care. That includes services like preventive cleanings, x-rays, restorative services like fillings, and other more serious forms of oral surgery if you ever need them.

## Why should I consider it?

Poor oral health isn't just aesthetic, it's also been linked to conditions including diabetes, heart disease, and strokes. So, while brushing and flossing every day can help keep your teeth clean, nothing should replace regular visits to the dentist.

You will receive these benefits if you meet the conditions listed in the policy.



## Staying healthy

Joe visits his dentist for a routine dental cleaning, to take care of his teeth as well as his overall health.

Oral health is about more than just teeth and gums. It's also essential for a range of other health and wellbeing reasons:

**Cardiovascular disease:** Some research suggests that heart disease, clogged arteries, and infections may be linked to inflammation and infections from oral bacteria.

**Osteoporosis:** Weak and brittle bones may be linked to tooth loss.

**Diabetes:** Research shows that people with gum disease find it more difficult to control their blood sugar levels.

**Alzheimer's disease:** Tooth loss before the age of 35 may be a risk factor for Alzheimer's disease.

All information contained here is from the Mayo Clinic, Oral Health: A Window to Your Overall Health, [www.mayoclinic.com](http://www.mayoclinic.com). 2018.



# Your dental coverage

**Option 1: Managed Dental Care±** plan, you enjoy negotiated discounts from our network dentists. You pay a fixed copay for each covered service. Out-of-network visits are not covered.

**Option 2: PPO** plan, you can visit any dentist; but you pay less out-of-pocket when you choose a PPO dentist. Out-of-network benefits are based on a percentile of the prevailing fee data for the dentist's zip code.

Your Dental Plan	Option 1: Managed Dental Care±	Option 2: PPO	
<b>Your Network is</b>	Managed DentalGuard	DentalGuard Preferred	
<b>Plan year deductible</b>		<i>In-Network</i>	<i>Out-of-Network</i>
Individual	No deductible	\$25	\$50
Family limit		3 per family	
Waived for		Preventive	Preventive
<b>Charges covered for you (co-insurance)</b>	<i>Network only</i>	<i>In-Network</i>	<i>Out-of-Network</i>
Preventive Care	You pay a copay for each	100%	100%
Basic Care	covered procedure. See	100%	80%
Major Care	"Plan Details", for	60%	50%
Orthodontia	more information.	50%	50%
<b>Annual Maximum Benefit</b>		\$1500	
<b>Maximum Rollover</b>	Maximum Rollover is not	Yes	
Rollover Threshold	applicable for this plan type.	\$700	
Rollover Amount		\$350	
Rollover In-network Amount		\$500	
Rollover Account Limit		\$1250	
<b>Lifetime Orthodontia Maximum</b>	Not Applicable	\$1500	
<b>Office visit copay</b>	\$10	None	
<b>Dependent Age Limits</b>	26	26	



# Your dental coverage

## A Sample of Services Covered by Your Plan:

		Option 1: Managed Dental Care±	Option 2: PPO	
		You Pay	Plan pays (on average)	
		Network only	In-network	Out-of-network
Preventive Care	Cleaning (prophylaxis)	\$0	100%	100%
	Frequency:	2 times in 12 months <sup>^</sup>		2 in 12 Months
	Fluoride Treatments	\$0	100%	100%
	Limits:	No Age Limits		Under Age 19
	Oral Exams	\$0	100%	100%
	Periodontal Maintenance	\$0	100%	100%
	Frequency:	2 times in 12 months <sup>^</sup>		Once Every 3 Months
		(Standard)		
	Sealants (per tooth)	\$0	100%	100%
	X-rays	\$0	100%	100%
Basic Care	Anesthesia*	Restrictions Apply	100%	80%
	Fillings‡	\$0	100%	80%
	Perio Surgery	\$200-380	100%	80%
	Repair & Maintenance of Crowns, Bridges & Dentures	\$0-160	100%	80%
	Root Canal	\$120-270	100%	80%
	Scaling & Root Planing (per quadrant)	\$0	100%	80%
	Simple Extractions	\$0	100%	80%
	Surgical Extractions	\$30-200	100%	80%
Major Care	Bridges and Dentures	\$381-575	60%	50%
	Dental Implants	Not Covered	60%	50%
	Inlays, Onlays, Veneers**	\$250-370	60%	50%
	Single Crowns	\$375	60%	50%
Orthodontia	Orthodontia	\$2,500-2,800	50%	50%
	Limits:	Adults & Child(ren)		Adults & Child(ren)
Cosmetic Care	Bleaching	\$165	Not Covered	Not Covered

**Managed Dental Care: A link to the complete list of dental services can be found on "Our commitment to you" page.**

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 student 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. (^Additional cleanings are available for an additional co-pay).



# Your dental coverage

## Manage Your Benefits:

Go to [www.Guardianlife.com](http://www.Guardianlife.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.Guardianlife.com](http://www.Guardianlife.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.

±Underwritten by: First Commonwealth Insurance Company - (IL), First Commonwealth of Missouri - (MO), First Commonwealth Limited Health Services Corporation - (IN), First Commonwealth Limited Health Services Corporation of Michigan - (MI), Managed Dental Care - (CA), Managed DentalGuard, Inc. - (NJ, OH, TX), The Guardian Life Insurance Company of America - (CO, FL, NY and all PPO and Indemnity plans) . All referenced companies are wholly owned subsidiaries of The Guardian Life Insurance Company of America. Limitations and exclusions apply. Plan documents are the final arbiter of coverage.

## EXCLUSIONS AND LIMITATIONS

- Important Information about Guardian's DentalGuard Indemnity and DentalGuard Preferred Network PPO plans: This policy provides dental insurance only. Coverage is limited to those charges that are necessary to prevent, diagnose or treat dental disease, defect, or injury. Deductibles apply. The plan does not pay for: oral hygiene services (except as covered under preventive services), orthodontia (unless expressly provided for), cosmetic or experimental treatments (unless they are expressly provided for), any treatments to the extent benefits are payable by any other payor or for which no charge is made, prosthetic devices unless certain conditions are met, and services ancillary to surgical treatment. The plan limits benefits for diagnostic consultations and for preventive, restorative, endodontic, periodontic, and prosthodontic services. The services, exclusions and limitations listed above do not constitute a contract and are a summary only. The Guardian plan documents are the final arbiter of coverage. Contract # GP-I-DG2000 et al..
- This policy provides dental coverage only. This policy provides managed care dental benefits through a network of participating general dentists and specialty care dentists. Except for limited emergency services, benefits will be provided for services provided by the primary care dentist selected by the member. The member must pay the primary care dentist a patient charge/copayment for most covered services. No benefits will be paid for treatment by a specialist unless the patient is referred by his or her primary care dentist and the referral is approved under the policy. Only those services listed in the policy's schedule of benefits are covered. Certain services are subject to frequency or other periodic limitations. Where orthodontic benefits are specifically included, the policy provides for one course of comprehensive treatment per member. Unless specifically included, the Managed Dental Care policy does not provide orthodontic benefits if comprehensive orthodontic treatment or retention is in progress as of the member's effective date under the Managed Dental Care policy. The services, exclusions and limitations listed above do not constitute a contract and are a summary only. The applicable Managed Dental Care documents are the final arbiter of coverage. See your Certificate for complete specifics of all Exclusions and Limitations. All products, unless otherwise noted, are underwritten by The Guardian Life Insurance Company of America ("Guardian") or one of the following wholly-owned Guardian subsidiaries: Managed Dental Care (CA); First Commonwealth Insurance Company (IL); First Commonwealth Limited Health Services Corporation (IN); First Commonwealth Limited Health Services Corporation of Michigan (MI); First Commonwealth of Missouri, Inc. (MO) and Managed DentalGuard, Inc. (NJ, OH and TX). Any reference to a specific product type, including but not limited to "DHMO" or "Prepaid" is not intended to refer to a specific state license designation, but rather is merely intended to refer to a general product design. Such DHMO, or prepaid products, are licensed in the applicable jurisdiction. In addition, certain products are underwritten by Dominion Dental Services, Inc. (DC, DE, MD, PA and VA) and LIBERTY Dental Plan of Nevada, Inc. (NV). Please see the applicable policy forms for details. In the event of conflict between this brochure and the policy forms, the policy forms shall control.
- **PPO and or Indemnity Special Limitation:** Teeth lost or missing before a covered person becomes insured by this plan. A covered person may have one or more congenitally missing teeth or have lost one or more teeth before he became insured by this plan. We won't pay for a prosthetic device which replaces such teeth unless the device also replaces one or more natural teeth lost or extracted after the covered person became insured by this plan. R3-DG2000