

Benefit Summary

for Dental Maximum Rollover Plan has been prepared for the employees of:

Landrum Professional Employer Services

Deductible- \$50 individual (3 per family maximum) (*Waived for Preventive Services)

Services Percentage Paid

Preventive Services

100%

Emergency Palliative Treatment
Oral Examination - every six months
X-Rays - four bitewings every twelve months full mouth series every five years
Teeth Cleaning - every six months
Fluoride Treatments for Children - every six months under age 14
Space Maintainers for Children - under age 16
Topical Sealants for unrestored molar teeth
-one treatment for child(ren) under 16 in a three (3) year period

Basic Services

80%

Laboratory Test
Diagnostic Consultation- one per year
Fillings: Amalgam & Acrylic
Crowns: Stainless Steel
Repairs of dentures, bridgework, crowns, etc.
General Anesthesia- surgical procedures only
Injectable Antibiotics- for treatment of a dental condition only

Major Services

50%

Endodontic Services/Root Canal Therapy
Periodontal Services
Oral Surgery- Uncomplicated extractions
Bridges Installation-fixed and removable
Dentures- Full and Partial
Crowns: Acrylic Metal, Porcelain
Inlays
Onlays
Posts

Monthly Premium:

Employee Only	\$26.40
Employee & Spouse	\$64.43
Employee & Children	\$64.43
Employee & Family	\$77.35

- There is a **\$1,500 annual maximum in-network** and **\$1,000 annual maximum out of network** for Preventive, Basic and Major services combined, subject to the maximum rollover.

Benefit Summary



The Guardian Life Insurance Company of America, New York, NY

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- **Maximum Rollover:** With Maximum Rollover, we'll roll over a portion of each member's unused annual maximum, called the Maximum Rollover Amount, into his or her Maximum Rollover Account (MRA). The MRA can be used in future years, if a member reaches the plan's Annual Maximum.

Even better, if a member uses the services of Preferred Providers exclusively during the benefit year, we'll increase the amount credited to his or her MRA to the In-network Only Maximum Rollover Amount.

To qualify, a member must submit a claim and not exceed the paid claims Threshold during the benefit year. The employee and each insured dependent maintain separate MRAs based on their own claim activity. Each member's MRA may not exceed the MRA limit.

PLAN ANNUAL MAXIMUM *	THRESHOLD	MAXIMUM ROLLOVER AMOUNT	IN-NETWORK ONLY MAXIMUM ROLLOVER AMOUNT	MAXIMUM ROLLOVER ACCOUNT LIMIT
\$1000	\$500	\$250	\$350	\$1000

* If a plan has a different annual maximum for PPO benefits vs. non-PPO benefits, (\$1500 PPO/\$1000 non-PPO for example) the non-PPO maximum determines the Maximum Rollover plan.

- *Deductible is waived for Preventive services. 3 individual deductibles per family.
- Eligible dependents include your unmarried children up to age 20 or 26, if the child is dependent upon the employee for support and is: (i) living in the employee's household; or (ii) a full-time or part-time student.
- Employee/Dependents enrolling outside of the plan eligibility period may be subject to Late Entrant¹ penalties.
- All out of network services are based on usual, reasonable, and customary rates for given area.
- Dental Claims - P. O. Box 2459, Spokane, WA 99210-2459, ph: 1-800-541-7846, fax: 509-468-4590.
- Guardian has contracted with dental providers to provide discounts off services and procedures to Guardian dental plan members. To locate a provider, please reference our On-Line Provider Directory at www.GuardianLife.com.
- Pre-determination Review - Guardian will gladly assist you and your dentist by determining what benefits could be payable for services and procedures over \$300. Have your dentist fax your treatment plan to Guardian, note that it is a pre-determination review and we will let your dentist know what benefits would be payable.
- **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

¹ A late entrant is a person who becomes insured more than 31 days after he is eligible; or becomes insured again, after his coverage lapsed because he did not make required payments. We won't cover charges incurred by a late entrant for (1) Group II (basic) services until 6 months from the date he is insured by this plan; and (2) Group III (major) services until 12 months from the date he is insured by this plan.

DentalGuard General Limitations and Exclusions: 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, 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-1-DG2000 et al.

This handout is for illustrative purposes. Benefit booklets are available at, www.landrumprofessional.com. If there is a discrepancy between this handout and your benefit booklet, the benefit booklet prevails.



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