

# Dental Coverage

Here is your new dental coverage, which includes your enrollment form. **Make sure you return the completed form, if applicable, to your plan administrator.**

If you miss the deadline, the coverage may be delayed or you may not be eligible for enrollment this year.



## HIGHLIGHTS:

- Choice of two dental plans
- Single and family coverage available
- Visit any dentist
- Reliable dental claims payment; 4 day average turnaround
- Plan Coverage begins July 01, 2011

## Questions? Concerns?

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Helpline (888) 600-1600

Call weekdays, 8:00AM to 8:30PM, EST

Find out if your dentist is in Guardian's network at [www.guardianlife.com](http://www.guardianlife.com).



## We're ready to get working for you

If you're like most employees, finding enough time in the day to accomplish your lengthy to-do list can often be no easy task.

As your Guardian coverage begins, we want you to know that we're here for you every step of the way and are committed to providing you with the resources to obtain fast, accurate answers to your benefits-related questions.

One way in which we do this is through our online member resource, Guardian Anytime<sup>sm</sup>, which allows you to manage your benefits when it works best for you — day or night. Plus, it offers helpful resources to ensure you get access to the quality care you need.

We encourage you to take a couple minutes to check out and register for Guardian Anytime<sup>sm</sup> at [www.GuardianAnytime.com](http://www.GuardianAnytime.com). We promise it will be time well spent.

Welcome to Guardian!

- Review your benefits
- Complete your enrollment form, if applicable
- Sign and return form to your plan administrator

# Welcome

## Dear Summit Management Consulting, LLC Employee,

We're pleased to tell you that Guardian will be our dental coverage provider this year. We have chosen Guardian because of its competitive rates, excellent service reputation, and reliable dental claims payment.

As you may know, the cost of dental coverage has risen dramatically over the past ten years. For companies like ours, costs have more than tripled since 1997. Even so, Summit Management Consulting, LLC will pay a generous percentage of the cost of your dental insurance in the coming year. If applicable, your contribution is paid through payroll deduction.

Summit Management Consulting, LLC

## UNDERSTAND YOUR COVERAGE:

**Plan Details** This booklet explains your basic plan options. Your detailed certificate of coverage along with your dental card will be provided to you after you enroll.

**Call the Helpline** Questions answered at (888) 600-1600.

**Find a network dentist in minutes**  
Use our Provider Online Search at [www.guardianlife.com](http://www.guardianlife.com)

**Optional pre-treatment review** If you expect your treatment will cost \$300 or more, you can find out how much your plan will pay before treatment starts.

**Ask your plan administrator** Change your coverage or replace a lost ID card by contacting your plan administrator.

**Understand your benefits** Please find a glossary for insurance terms included.



## Why Dental Insurance?

Good oral hygiene is important, not only for looks, but for general health as well. A routine dental examination can detect symptoms of more than 125 diseases, including heart disease, diabetes, anemia, stomach ulcers, osteoporosis and kidney disease. Regular check ups and cleanings can save you the pain and expense of future problems. Dental insurance will keep these visits affordable and is a cost-effective way to minimize health care costs for you and your family. The American Dental Hygienists' Association estimates that for every \$1 spent on prevention or oral health care, as much as \$8 to \$50 is saved on future emergency and restorative procedures. Using your dental insurance for regular dental check ups can improve your health by helping you:

- 1) Prevent Oral Cancer:** According to The Oral Cancer Foundation, someone dies from oral cancer every hour of every day in the United States alone. When you have your dental cleaning, your dentist is also screening you for oral cancer, which is highly curable if diagnosed early.
- 2) Prevent Gum Disease:** Gum disease is an infection in the gum tissues and bone that keep your teeth in place and is one of the leading causes of adult tooth loss. If diagnosed early, it can be treated and reversed. If treatment is not received, a more serious and advanced stage of gum disease may follow. Regular dental cleanings and check ups, flossing daily and brushing twice a day are key factors in preventing gum disease.
- 3) Help Maintain Good Physical Health:** Recent studies have linked heart attacks and strokes to gum disease, resulting from poor oral hygiene. A dental cleaning every six months helps to keep your teeth and gums healthy and could possibly reduce your risk of heart disease and strokes, as well as many other serious conditions.
- 4) Keep Your Teeth:** Since gum disease is one of the leading causes of tooth loss in adults, regular dental check ups and cleanings, brushing and flossing are vital to keeping as many teeth as you can. Keeping your teeth means better chewing function and ultimately, better health.
- 5) Prevent the Need for Advanced Treatment:** Your dentist and hygienist will be able to detect any early signs of problems with your teeth or gums that can be easily treatable. If these problems go untreated, root canals, gum surgery and removal of teeth could become the only treatment options available.
- 6) Have a Bright and White Smile:** Your dental hygienist can remove most tobacco, coffee and tea stains. During your cleaning, your hygienist will also polish your teeth to a beautiful shine.
- 7) Protect your children's health:** Tooth decay is the most common chronic childhood disease, five times more common than asthma and results in a loss of 51 million school hours each year. Regular check ups can help prevent tooth decay in your children.

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Sources: [www.about.com](http://www.about.com), *American Academy of Pediatrics*

# Dental Plans

**Option 1:** With your **NAP Plan** plan, you can visit any dentist; but you pay less out-of-pocket when you choose a PPO dentist.

**Option 2:** With your **VALUE Plan** plan, you can visit any dentist; but you pay less out-of-pocket when you choose a PPO dentist. Out-of-network benefits are limited to our PPO fee schedule.

COMPARE THE PLANS	Option 1: NAP Plan		Option 2: VALUE Plan	
	DentalGuard Preferred		DentalGuard Preferred	
<b>Calendar year deductible</b>	<i>In-Network</i>	<i>Out-Network</i>	<i>In-Network</i>	<i>Out-Network</i>
Individual	\$50	\$50	\$50	\$50
Family limit	3 per family		3 per family	
Waived for	Preventive	Preventive	Preventive	Preventive
<b>Charges covered for you (co-insurance)</b>	<i>In-Network</i>	<i>Out-Network</i>	<i>In-Network</i>	<i>Out-Network</i>
Preventive Care (e.g. cleanings)	100%	100%	100%	100%
Basic Care (e.g. fillings)	80%	80%	100%	100%
Major Care (e.g. crowns, dentures)	50%	50%	60%	60%
Orthodontia	50%	50%	50%	50%
<b>Annual Maximum Benefit</b>	\$1000	\$1000	\$1000	\$1000
<b>Maximum Rollover</b>	Yes		Yes	
Rollover Threshold	\$500		\$500	
Rollover Amount	\$250		\$250	
Rollover In-network Amount	\$350		\$350	
Rollover Account Limit	\$1000		\$1000	
<b>Lifetime Orthodontia Maximum</b>	\$1000		\$1000	
<b>Dependent Age Limits(Non-Student/Student)</b>	20/26		20/26	

## YOUR GUARDIAN PLAN OFFERS:

If you enroll in Dental, you receive a Vision Access Plan at no additional charge. Visit any network doctor in your Access Plan and you'll receive discounts on exams, glasses, contact lens professional services and laser vision surgery.

**Orthodontia coverage** for children

**No charge for preventive care** (subject to plan limits)

**Coverage of ViziLite Plus** early cancer detection screening exams

**Plan coverage begins** July 01, 2011

**Find out** if your dentist is in Guardian's network at [www.guardianlife.com](http://www.guardianlife.com)

*Let Guardian put its 30-plus years of dental benefits experience to work for you and your family.*

CATEGORY	PLAN DETAILS	Option 1: NAP Plan		Option 2: VALUE Plan	
		Plan pays (on average)		Plan pays (on average)	
		In-network	Out-of-network	In-network	Out-of-network
Preventive Care	Cleaning (prophylaxis)	100%	100%	100%	100%
	Frequency:	Once Every 6 Months		Once Every 6 Months	
	Fluoride Treatments	100%	100%	100%	100%
	Limits:	Under Age 19		Under Age 19	
	Oral Exams	100%	100%	100%	100%
	Sealants (per tooth)	100%	100%	100%	100%
	X-rays	100%	100%	100%	100%
Basic Care	Anesthesia*	80%	80%	100%	100%
	Fillings‡	80%	80%	100%	100%
	Perio Surgery	80%	80%	100%	100%
	Periodontal Maintenance	80%	80%	100%	100%
	Frequency:	Once Every 6 Months (Enhanced)		Once Every 6 Months (Enhanced)	
	Repair & Maintenance of Crowns, Bridges & Dentures	80%	80%	100%	100%
	Root Canal	80%	80%	100%	100%
	Scaling & Root Planing (per quadrant)	80%	80%	100%	100%
	Simple Extractions	80%	80%	100%	100%
	Surgical Extractions	80%	80%	100%	100%
Major Care	Bridges and Dentures	50%	50%	60%	60%
	Inlays, Onlays, Veneers**	50%	50%	60%	60%
	Single Crowns	50%	50%	60%	60%
Orthodontia	Orthodontia	50%	50%	50%	50%
	Limits:	Child(ren)		Child(ren)	

Please note: The plan details listed here are some of the most common services related to dental coverage. The co-insurance percentages for the PPO plan options correspond to the coverage categories of Preventive, Basic, Major and Orthodontia listed in the table above.

This is only a partial list of dental services. Your certificate of benefits will show exactly what is covered and excluded. \*\*Crowns, Inlays, Onlays and Labial Veneers are covered only when needed because of decay or injury and only 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 of 19; 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. The total number of cleanings and periodontal maintenance procedures are combined in a 12 month period. \*General Anesthesia – restrictions apply. ‡Fillings – restrictions may apply to composite fillings.

## EXCLUSIONS AND LIMITATIONS

- Important Information about Guardian's DentalGuard Indemnity and DentalGuard Preferred 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-1-DG2000 et al.

- **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

## UNDERSTANDING YOUR BENEFITS—DENTAL

<b>Basic care</b>	Moderately complex dental services. Most plans consider fillings and extractions to be basic care.
<b>Co-insurance</b>	The portion of the covered charge paid by Guardian.
<b>Claims Payment Basis</b>	<b>NAP Plan</b> The usual cost for a specific dental service in your area. Amounts over the specified Usual Customary & Reasonable percentile (90%) are usually the patient's responsibility: <b>In-Network:</b> Benefits are based on a negotiated contracted fee schedule, and no balance billing. <b>Out-of-Network:</b> Benefits are based on usual, reasonable, and customary rates for a given area.
<b>Claims Payment Basis</b>	<b>VALUE Plan</b> <b>In-Network:</b> You receive regular contracted savings, and no balance billing. <b>Out-of-Network:</b> Charges will be paid for only up to the maximum fee level established with our contracted network dentists; any amount that is charged over the fee schedule is the responsibility of the patient.
<b>Deductible</b>	The amount of charges you and your family must pay each plan year before the plan pays you any benefits.
<b>Family limit</b>	Maximum number of deductibles your family must pay in each plan year before this plan starts paying benefits for all covered family members for the rest of the plan year.
<b>In-network charges</b>	Charges for services provided by dentists who are a member of your plan's network.
<b>Major care</b>	More complex dental services. Most plans consider crowns and dentures to be major care.
<b>Out-of-network charges</b>	Charges for services provided by dentists who are not members of your plan's network.
<b>Plan year</b>	The 12 month period used to apply this plan's deductible and annual maximum. Your plan's plan year is the calendar year.
<b>PPO (Preferred Provider Organization)</b>	Plan that lets you visit any dentist, but usually provides better benefits for the services of PPO network dentists. PPO dentists have agreed to accept discounted fees as payment in full.
<b>Pre-determination Review</b>	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. This includes orthodontic treatment if your plan includes it. Pre-determination applies to PPO and Indemnity plans only.
<b>Preventive care</b>	Most routine dental services. Most plans consider checkups and cleanings to be preventive care.

# Maximum Rollover

## Save Your Dental Annual Maximum Dollars For a Time When You Need Them Most!

With Maximum Rollover, Guardian will roll over a portion of your unused annual maximum into your personal Maximum Rollover Account (MRA). The MRA can be used in further years, if you reach the plan's annual maximum.

Even better, if you use the services of Preferred Providers exclusively during the benefit year, Guardian will increase the amount credited to your MRA.

To qualify, you must submit a claim for covered services for which a benefit payment is issued, in excess of any deductible or co-pay, and you must not exceed the paid claims threshold during the benefit year.

You and your insured dependents maintain separate MRAs based on your own claim activity. Each MRA may not exceed the MRA limit.

You can view your annual MRA statement detailing your account and those of your dependents on [www.GuardianAnytime.com](http://www.GuardianAnytime.com).

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.

### NOTES:

Cases on either a calendar year or policy year accumulation basis qualify for the Maximum Rollover feature. For calendar year cases with an effective date in October, November or December, the Maximum Rollover feature starts as of the first full benefit year. For example, if a plan starts in November of 2008, the claim activity in 2009 will be used and applied to MRAs for use in 2010.

Under either benefit year set up (calendar year or policy year), Maximum Rollover for new entrants joining with 3 months or less remaining in the benefit year, will not begin until the start of the next full benefit year.

Maximum Rollover is deferred for members who have coverage of Major services deferred. For these members, Maximum Rollover starts when coverage of Major services starts, or the start of the next benefit year if 3 months or less remain until the next benefit year.





# Finding a dentist is easy

## Go online – it just takes minutes!

The best way to save money through your dental plan is by seeing a dentist in your plan's network. Guardian's Find a Provider site makes it easy for you to search for a dentist that meets your needs.

Guardian's Find a Provider site is available to you 24 hours a day, 7 days a week.

- Customize your search by specialty, languages spoken and more
- Get side-by-side comparisons of dentists' information (ie. office status, distance)
- Create a quick-list of "favorite" dentists – for easy reference online
- Get maps and directions to a dentist's office location
- View your results online or have them faxed or emailed to you
- Save your search criteria for easy access when you revisit the site
- Create a customized directory of dentists
- Nominate a dentist to be included in a network
- And much more!

Just go to **[www.GuardianLife.com](http://www.GuardianLife.com)**.  
Under "Resources", click on "Find a Provider".





## Your Guardian VSP Vision Access Program

An eligible person can receive discounts on vision care services or supplies from a vision provider that is under contract with Vision Service Plan's (VSP) Preferred Provider Organization (PPO) network. The eligible person must pay the entire discounted fee directly to the VSP network doctor. Discounts are not available from providers who are not members of VSP's network.

### Average Discounts

- Eye Exams: 20% off the VSP doctor's usual charge
- Frames, Standard Lenses and Lens Options: 20% off VSP doctor's usual charge, when a complete pair of prescription glasses is purchased.
- Contact Lens Professional Services: 15% off VSP doctor's usual charge for professional services. The contact lenses are not discounted.
- Laser Surgery: an average of 15% off the laser surgeon's usual charge or 5% off of any promotional price, if it is less than the usual discounted price

No ID cards are required, but the patient must notify the VSP network doctor that they have the Guardian VSP Access Plan at the time of service to receive their discount. Discounts are only available from the VSP network doctor that provided the eye exam to the patient within the last 12 months.

This is not insurance. The eligible person must pay the entire discounted fee directly to the VSP network doctor. There is no charge for the Discount Vision Access program. A person must be enrolled in a Guardian dental plan in order to be eligible for the Discount Vision Access program. When a person is no longer enrolled in a Guardian dental plan, access to the network discounts ends.

To find a VSP network doctor, visit [www.guardiananytime.com](http://www.guardiananytime.com) or call VSP member services at 1-877-814-8970.





## Employee Benefits Hotline (EBH)

Benefit specialists are available to answer questions as you sign up for your Guardian benefits

Toll-free Phone	E-mail
1-888-600-1600 8:00 a.m. – 8:30 p.m., Monday – Friday, Eastern Time	From <a href="http://www.GuardianAnytime.com">www.GuardianAnytime.com</a> , click on “secure channel” to send an e-mail (in your comments include “Question for EBH”)

### STEP 1: Determine if you should contact the EBH.

Ask yourself these questions. If you answer yes to any of them, contact the EBH!

- Do I need to make a dental or vision appointment before I’ve received my ID card?  
*(It is suggested you contact our hotline 72 hours prior to your visit so you can ensure your provider has your coverage information. Coverage begins on your plan’s effective date.)*
- Do I have questions about the benefits covered under the plans my employer is offering?
- Do I need help completing my enrollment form?

### STEP 2: Have the following ready before calling or include it in your e-mail.

- Name of the company you work for OR
- Your company’s group number (refer to your enrollment materials)

### STEP 3: Call 888-600-1600 to get answers!

- Press #1 to identify yourself as an employee.
- At the next prompt, for questions about the following press the appropriate key:
  - Dental Benefits - #1
  - All else - #3

You will be prompted to enter your company’s group number. If you do not know your company’s group number, press 0 to be directed to a Guardian representative.

**The Employee Benefits Hotline provides support in over 50 different languages!**

**IMPORTANT NOTE:** Once you are officially enrolled in a plan, you will receive additional information with other toll-free phone numbers to service you after you have signed up. If you are looking for a dentist or vision provider who participates in your plan, go to [www.GuardianAnytime.com](http://www.GuardianAnytime.com).

# Thank You

If applicable, return your completed form to your plan administrator.

## Please remember to:

- Check the coverage you want
- Include your social security number  
(and those of your dependents, if applicable)
- Include dates of birth
- Indicate the best way to reach you
- Include your name on each page of the form.
- Sign and date form

## You chose...

### Dental:

- Option 1: NAP Plan
- Option 2: VALUE Plan

## Date form submitted:

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**Make the most of your Guardian benefits at  
[www.GuardianAnytime.com](http://www.GuardianAnytime.com)**

Enrolled members and their dependents can access helpful, secure information about their Guardian benefit(s) instantly at [www.GuardianAnytime.com](http://www.GuardianAnytime.com)

- Review your benefits
- Look up coverage amounts
- Check the status of a claim
- Receive e-mail alerts when a response to your dental\* or medical claim is available online
- Print forms and plan materials...and much more

**To register, go to [www.GuardianAnytime.com](http://www.GuardianAnytime.com)**

## **Summit Management Consulting, LLC Dental Benefits Plan**