



# MY HR PROS Pro Benefits

## DENTAL

Option 1 or 2: HIGH PLAN or LOW PLAN plan, you'll have access to one of the largest networks of dentists with two 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 a percentile of the prevailing fee data for the dentist's zip code.

Your Dental Plan	Option 1: High Plan		Option 2: Low Plan	
	Tier 1	Tier 2	Tier 1	Tier 2
Your Network is DentalGuard Preferred Network	In-Network	Out-of-Network	In-Network	Out-of-Network
<b>Calendar year deductible</b>	<i>Tier 1</i>	<i>Tier 2</i>	<i>Tier 1</i>	<i>Tier 2</i>
Individual	\$50	\$50	\$50	\$50
Family limit	3 per family (applies to all levels)		3 per family (applies to all levels)	
Waived for	Preventive	Preventive	Preventive	Preventive
<b>Charges covered for you (co-insurance)</b>	<i>Tier 1</i>	<i>Tier 2</i>	<i>Tier 1</i>	<i>Tier 2</i>
Preventive Care	100%	100%	80%	80%
Basic Care	90%	80%	80%	80%
Major Care	60%	50%	50%	50%
Orthodontia	50%	50%	50%	50%
<b>Annual Maximum Benefit</b>	\$1500 (applies to all levels)		\$1000 (applies to all levels)	
<b>Maximum Rollover</b>	Yes (applies to all levels)		Yes (applies to all levels)	
Rollover Threshold	\$700		\$500	
Rollover Amount	\$350		\$250	
Rollover Amount	\$500		\$350	
Rollover Account Limit	\$1250		\$1000	
<b>Lifetime Orthodontia Maximum</b>	\$1000 (applies to all levels)		\$500 (applies to all levels)	
<b>Dependent Age Limits</b>	26 (applies to all levels)		26 (applies to all levels)	

Dental High Plan	Per Month
Employee Only	30.47
Employee Spouse	56.48
Employee Child	58.34
Family	83.12

Dental Low Plan	Per Month
Employee Only	26.56
Employee Spouse	49.68
Employee Child	48.39
Family	69.91