

DENTAL RATE SUMMARY

Carrier: Network: Plan Option:	Guardian DentalGuard Preferred Base	Guardian DentalGuard Preferred Buy-Up	Sun Life Assurant Dental Base	Sun Life Assurant Dental Buy-Up		
	In/Out	In/Out	In/Out	In/Out		
Coinsurance: Preventive (A):	100%	100% / 100%	100%	100%		
Basic (B):	50%	90% / 80%	50%	90% / 80%		
Major (C):	0%	60% / 50%	0%	60% / 50%		
Orthodontia (D):	n/a	n/a	n/a	n/a		
(A) (B) & (C) Calendar Year Maximum:	\$750	\$1,000	\$750	\$1,000		
(D) Lifetime Maximum if applicable:	n/a	n/a	n/a	n/a		
Individual Deductible:	\$50	\$50	\$50	\$50		
Family Deductible:	\$150	\$150	\$150	\$150		
Deductible Waived for Preventive:	Yes	Yes	Yes	Yes		
Deferred Major:	N/A	No	N/A	12 Months		
UCR:	90%	90%	90%	90%		
Endodontics & Periodontics Coverage Level:	Not Covered	Major	Not Covered	Major		
MONTHLY RATES:	<u>Base</u>	<u>Buy-up</u>		<u>Base</u>	<u>Buy-up</u>	
	<u>Current</u>	<u>Renewal</u>	<u>Current</u>	<u>Renewal</u>	<u>Option</u>	<u>Option</u>
Employee Only:	\$19.93	\$19.93	\$36.21	\$36.21	\$19.93	\$36.21
Employee + 1 Dependent:	\$38.91	\$38.91	\$69.89	\$69.89	\$38.91	\$69.89
Employee + 2 or more:	\$71.49	\$71.49	\$122.44	\$122.44	\$71.49	\$122.44
Rate Guarantee	24 Months		24 Months		24 Months	24 Months
<p><i>These are preliminary rates only. Final rates are subject to underwriting and/or final enrollment.</i></p> <p><i>This is only a summary of benefits.</i></p> <p><i>Carrier's proposals, summaries, & certificate booklets (when issued) preside over this summary.</i></p>						