

## Dental PPO

Deductions per year: 12

These rates were prepared on 2/8/2019 and are valid for 90 days.

## Individual Dental PPO(IDN8000) for NY

Applicable to policy form Individual Dental PPO(IDN8000)

Zip Codes: 100, 101, 102, 103, 104, 105, 106, 107, 108, 109, 110, 111, 112, 113, 114, 115, 116, 117, 118, 119, 125, 126, 127

COVERAGE LEVEL	ISSUE AGE	INDIVIDUAL	INDIVIDUAL AND SPOUSE	INDIVIDUAL AND CHILDREN	INDIVIDUAL AND FAMILY
Plan 1 - 0/40/50 member resp., \$1,000 MAC	17-74	\$29.87	\$55.77	\$72.12	\$105.86
Plan 2 - 0/20/50 member resp., \$1,000 MAC	17-74	\$31.75	\$59.90	\$76.05	\$112.42
Plan 3 - 0/20/50 member resp., \$1,500 MAC	17-74	\$32.18	\$60.76	\$76.64	\$113.46
Plan 4 - 0/20/50 member resp., \$2,000 MAC	17-74	\$33.14	\$62.59	\$78.61	\$116.51
Plan 5 - 0/20/50 member resp., \$1,500 PPO	17-74	\$47.88	\$91.83	\$117.05	\$173.82

Zip Codes: 120, 121, 122, 123, 124, 128, 129, 130, 131, 132, 133, 134, 135, 136, 137, 138, 139, 140, 141, 142, 143, 144, 145, 146, 147, 148, 149

COVERAGE LEVEL	ISSUE AGE	INDIVIDUAL	INDIVIDUAL AND SPOUSE	INDIVIDUAL AND CHILDREN	INDIVIDUAL AND FAMILY
Plan 1 - 0/40/50 member resp., \$1,000 MAC	17-74	\$27.43	\$50.94	\$65.88	\$96.53
Plan 2 - 0/20/50 member resp., \$1,000 MAC	17-74	\$29.15	\$54.74	\$69.50	\$102.58
Plan 3 - 0/20/50 member resp., \$1,500 MAC	17-74	\$29.54	\$55.53	\$70.02	\$103.53
Plan 4 - 0/20/50 member resp., \$2,000 MAC	17-74	\$30.41	\$57.21	\$71.83	\$106.31
Plan 5 - 0/20/50 member resp., \$1,500 PPO	17-74	\$43.88	\$83.92	\$106.55	\$158.21

### Important Notice Regarding Coverage

Insurance coverage has exclusions and limitations that may affect benefits payable. For a complete description of benefits, limitations and exclusions, please refer to an outline of coverage, sample policy/certificate, proposal description or see your Paul Revere benefits counselor. Coverage type, benefits and rates vary by state. Coverage may not be available in all states. Rates provided are illustrative and your actual premium may be different depending on your particular situation and plan choices. Colonial Voluntary Benefits products are underwritten by: The Paul Revere Life Insurance Company, Worcester, MA.

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## Individual Dental PPO

Dental coverage is one of the most valued workplace benefits because of its importance to the overall well-being of employees. When surveyed, 68% of employees said that they consider dental insurance a must-have<sup>1</sup>.

Individual Dental PPO covers a wide range of treatments, from routine cleanings to root canals and pays benefits based on a defined co-insurance percentage. With this coverage, employees have the freedom to choose any dentist, but when they see an in-network dentist they can receive discount on services which reduce their out-of-pocket costs.

<sup>1</sup> MetLife, Annual U.S. Employee Benefit Trends Study, 2017, [metlife.com](http://metlife.com)

## Dental Plan Overview

- Five PPO plan options; employer may offer a maximum of two plans to an account
- Coverage options include: Individual, Individual + Spouse, Individual + Children, and Individual + Family
- Immediate, 100% coverage on preventive services from any in-network dentist
- No waiting periods on preventive or basic services like fillings and simple extractions
- Nationwide dental network with more than 323,000 access points. Use an in-network dentist to avoid balance billing and receive network savings

Plan Options	Policy Year Max per Covered Person	Preventive (Class A)	Basic (Class B)	Major (Class C)
Plan 1/MAC	\$1,000	100% co-insurance 0% member responsibility	60% co-insurance 40% member responsibility	50% co-insurance 50% member responsibility
Plan 2/MAC	\$1,000	100% co-insurance 0% member responsibility	80% co-insurance 20% member responsibility	50% co-insurance 50% member responsibility
Plan 3/MAC	\$1,500	100% co-insurance 0% member responsibility	80% co-insurance 20% member responsibility	50% co-insurance 50% member responsibility
Plan 4/MAC	\$2,000	100% co-insurance 0% member responsibility	80% co-insurance 20% member responsibility	50% co-insurance 50% member responsibility
Plan 5/ Passive PPO	\$1,500	100% co-insurance 0% member responsibility	80% co-insurance 20% member responsibility	50% co-insurance 50% member responsibility

\*MAC stands for Maximum Allowable Charge; PPO stands for Preferred Provider Organization

- Class C Services: subject to a 12-month waiting period. Waiting periods may be waived if takeover is approved.
- Deductible: \$50 per person per policy year. (Applies to Class B & C; up to 3 per family)
- Plan levels vary by co-insurance levels, annual maximums, and benefit design
- Freedom to choose any dentist. When visiting an in-network provider, insureds will only be responsible for their co-insurance portion. Out-of-network benefits are paid based on whether the plan is a MAC plan or a passive PPO plan.

Applicable to New York

Colonial Voluntary Benefits insurance products are underwritten by The Paul Revere Life Insurance Company, Worcester, MA. This information is only intended for proposal use with employers.  
6/18 The Paul Revere Life Insurance Company, 1200 Colonial Life Boulevard, Columbia, South Carolina 29210

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## **Out-of-Network Benefits**

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### **Plans 1-4 (MAC)**

- Out-of-Network benefits will be paid based on the lesser of the dentist's actual charge or the in-network negotiated rate for a specific geographic area.
- Employees will be billed for any remaining amount up to the billed charge.
- The MAC reimbursement option drives more participants to in-network dentists, lowers claims costs, and reduces the overall cost of the plan.

### **Plan 5 (Passive PPO)**

- Out-of-Network benefits are paid based on the Maximum Allowable Charge which is the lesser of the dentist's actual charge or the customary charge in a specific geographical area. Customary charge set at the 90<sup>th</sup> percentile.
- The majority of the time, out-of-network dentists will charge more for services than in-network dentists.
- Based on the Maximum Allowable Charge, Passive PPO plans typically pay more for out-of-network benefits than MAC plans.
- This plan is best suited for employees in geographical areas which lack the adequate presence of network dentists.

## **Employer Optional Benefits – If selected, applies to all in an account**

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### **Orthodontia Benefits (Class D)**

- Pays 50% co-insurance for treatment involving a covered orthodontic procedure
- \$1,000 lifetime maximum per covered dependent child up to age 19
- 12-month waiting period. Waiting periods may be waived if takeover is approved
- If selected, will apply to all Individual + Children and Individual + Family policies only

### **Rollover Benefit**

- Allows members to rollover unused portions of their annual maximum benefit to future years
- Each member must have one cleaning, one regular exam, and total dental claims paid during the year below the threshold limit
- If all three criteria are met, a portion of the annual maximum will rollover to the next year, increasing the next year's annual maximum

## **Available Riders – Employee Choice Options**

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### **Vision Rider**

- Fully-insured vision benefits with coverage for eye exams and materials
- Maximum of one benefit for eye exam and one benefit for vision correction materials per covered person per benefit year
- The materials co-pay will cover the purchase of lenses with generous allowances for frames or contact lenses
- There are no brand restrictions for frames or contacts



## **Nationwide Dental and Vision Networks**

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- **Large Dental network** with freedom of choice: You can find a dentist in our national PPO network, which has more than 323,000 access points, and you can choose any dentist you want – in-network or out-of-network
- **Large Vision network** with more than 40,000 access points, that includes independent professionals and retail stores like Walmart, Target, Costco, Pearle Vision America's Best and more
- **When members stay in-network**, your dentist or eye care professional's office will file claims on their behalf

## **Additional Dental and Vision Features**

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- **Rate Stability** – Guaranteed renewable rates that won't change on an annual basis due to group claims experiences. Rates are filed with the states and can only change if we change rates for all policies issued in a state
- **Guaranteed Issue with no participation requirements** – GI for one enrolled with no minimum participation requirements. All eligible employees, ages 17 to 74, qualify for coverage without underwriting
- **Takeover** – Ability to waive Class C and Class D waiting periods and replace the existing dental carrier
- **Guaranteed Renewability** – Employees can keep the same coverage up to age 75 at the same rates if they change jobs or retire
- **Range of choices** – Choose from 5 distinct plan designs to provide a comprehensive dental product to employees
- **Focus on Wellness** – Plans cover regular checkups and cleanings at 100% with no deductible
- **Optional Vision Rider Available** – Employees may purchase a vision rider to receive benefits for annual eyes exams and contact lenses or eyeglasses (lenses and frames)

## **Underwriting**

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- Coverage is guaranteed issue for all eligible employees.
- To offer this plan, we require at least one enrolled. No minimum participation requirements.
- Takeover is available. If replacing another dental carrier's plan, waiting periods can be waived for those employees who had prior coverage. Underwriting approval is required.

## **Employee Eligibility Requirements**

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- Employees are working a minimum of 20 hours per week
- Employees meet the issue age requirements of 17 through 74 (up to age 75)