

Rates | Guardian Family Advantage

Metal Level | High

Rating Area	Individual Monthly Rate	
	Age 0-20	Age 21-65 and over
1	\$35.51	\$26.63
2	\$31.62	\$23.65
3	\$35.30	\$26.47
4	\$35.84	\$26.88
5	\$35.42	\$26.56
6	\$32.76	\$24.52
7	\$32.99	\$24.70
8	\$34.42	\$25.80
9	\$32.34	\$24.20

(Product ID# 16596MN0040002)

Information about this plan's rates:

- Maximum number of children used to quote a children-only contract is 3 children
- Rating area is based on the county in which the employer resides. The map of the State of MN Rating Areas is included at the end of this document.
- This plan is not offered in Cook, Itasca, Lake of the Woods, Lincoln, Pipestone, and Saint Louis counties.

Benefits | Guardian Family Advantage

In-Network Deductible - \$50 (waived for Preventive) Out-of-Network Deductible-\$50

Services	In- Network Percentage Paid	Out-of-Network Percentage Paid
Preventative Services		
<i>Most routine dental services, including: oral exams, cleanings, x-rays</i>	100%	80%
Basic Services		
<i>Moderately complex dental services, including fillings, and simple extractions</i>	80%	60%
Major Services - 12 Month Waiting Period		
<i>More complex dental services including: crowns, complex extractions, oral surgery, periodontal and endodontic services</i>	50%	40%
Orthodontic Services		
<i>Medically Necessary Orthodontia Applies to members under age 19 only</i>	50%	30%





Out of Pocket Maximum – Applies to members under 19 only Once this amount is reached, Guardian will pay 100% of your child’s dental charges for the rest of the year		
Individual (One Child)	\$350	Not applicable
Family (2 or more Children)	\$700	Not applicable
Plan Maximum The maximum amount that you can be reimbursed for services received		
Annual Maximum Applies to members 19 and over*	\$1500	\$1500
Maximum Rollover – Applies to members 19 and over This allows you to rollover a part of your annual maximum for future use		
Threshold: Maximum dollar amount of claims that can be paid for you to be eligible	\$700	
Rollover Amount: Amount you can rollover this year	\$350	
In-Network only Rollover: : Rollover more if you see a network dentist	\$500	
Account Limit	\$1,250	

Limitations and Exclusions for Guardian PPO Plans

- Coverage is limited to charges that are necessary to prevent, diagnose or treat dental disease, defect or injury. Depending on plan type, deductibles, waiting periods, per service frequency limitations, and payment limits may apply.
- Please refer to certificate of coverage for full plan description and the list of covered dental services.
- This plan does not pay for:
 - Any restoration procedure, appliance or dental prosthesis used solely to: a) alter vertical dimension; b) restore or maintain occlusion, except to the extent that this plan covers orthodontic treatment; c) splint or stabilize teeth for periodontal reasons; or d) treat a condition caused by abrasion or attrition.
 - Cosmetic or experimental treatments, unless specifically listed in the BENEFIT DETAIL section of this proposal as a covered cosmetic service.
 - Replacing a lost, stolen or missing appliance or prosthetic device; or making a spare appliance or device.
 - Treatment needed due to: a) an on-the-job or job-related injury; or b) a condition for which benefits are payable by Workers' Compensation or similar laws.
 - Replacing an appliance or prosthetic device with a like appliance or device, unless: a) it is damaged while in the covered person's mouth in an injury suffered while insured, and can't be fixed; or b) can't be made usable and meets the replacement age criteria selected by the employer.
 - Treatment of congenital or developmental malformations, or the replacement of congenitally missing teeth.
 - Evaluations and consultations for non-covered services; detailed and extensive oral evaluations.



- Any procedure performed in conjunction with, as part of, or related to a non-covered procedure.

Guardian Dental is underwritten by The Guardian Life Insurance Company of America, New York, NY. Products are not available in all states.

Policy limitations and exclusions apply. Optional riders and/or features may incur additional costs. Plan documents are the final arbiter of coverage.

Get the “Maximum” from your PPO dental benefits

A solution to reducing costs and allowing employees to get more out of their dental funds.

Guardian will roll over a portion of the unused annual dental maximum into a personal Maximum Rollover Account, which can be used in future years if the plan’s annual maximum is reached. As an added advantage, more money is rolled over if in-network dentists are used exclusively during the benefit year.

How Maximum Rollover Works

Depending on the plan’s annual maximum, if claims dollars for the year don’t exceed a certain threshold, the set Maximum Rollover Amount (pre-determined based on the annual maximum) can be rolled over.

Plan Annual Maximum*	Threshold	Maximum Rollover Amount	In-Network Only Rollover Amount	Maximum Rollover Account Limit
\$1,500	\$700	\$350	\$500	\$1,250
Maximum Claims Reimbursement	Claims amount that determines rollover eligibility	Additional dollars added to Plan Annual Maximum for future years	Additional dollars added to Plan Annual Maximum for future years if only in-network providers were used during the benefit year	Maximum Rollover Account cannot exceed \$1,250

* 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

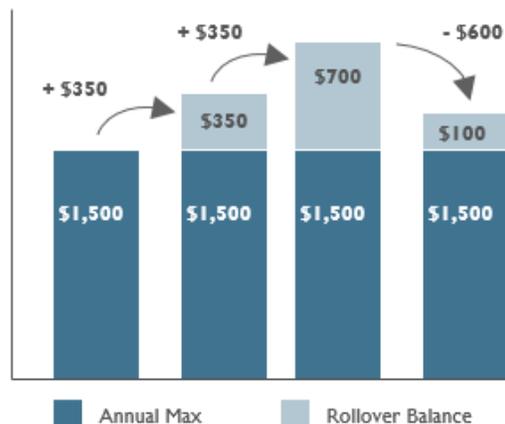
Here’s how the benefits work (Sample Plan)

YEAR ONE: Jane starts with a \$1,500 Plan Annual Maximum. She submits \$150 in dental claims. Since she did not exceed the \$700 Threshold, she receives a \$350 rollover that will be applied to Year Two.

YEAR TWO: Jane now has an increased Plan Annual Maximum of \$1,850. This year, she submits \$500 in claims and receives an additional \$350 rollover added to her Plan Annual Maximum.

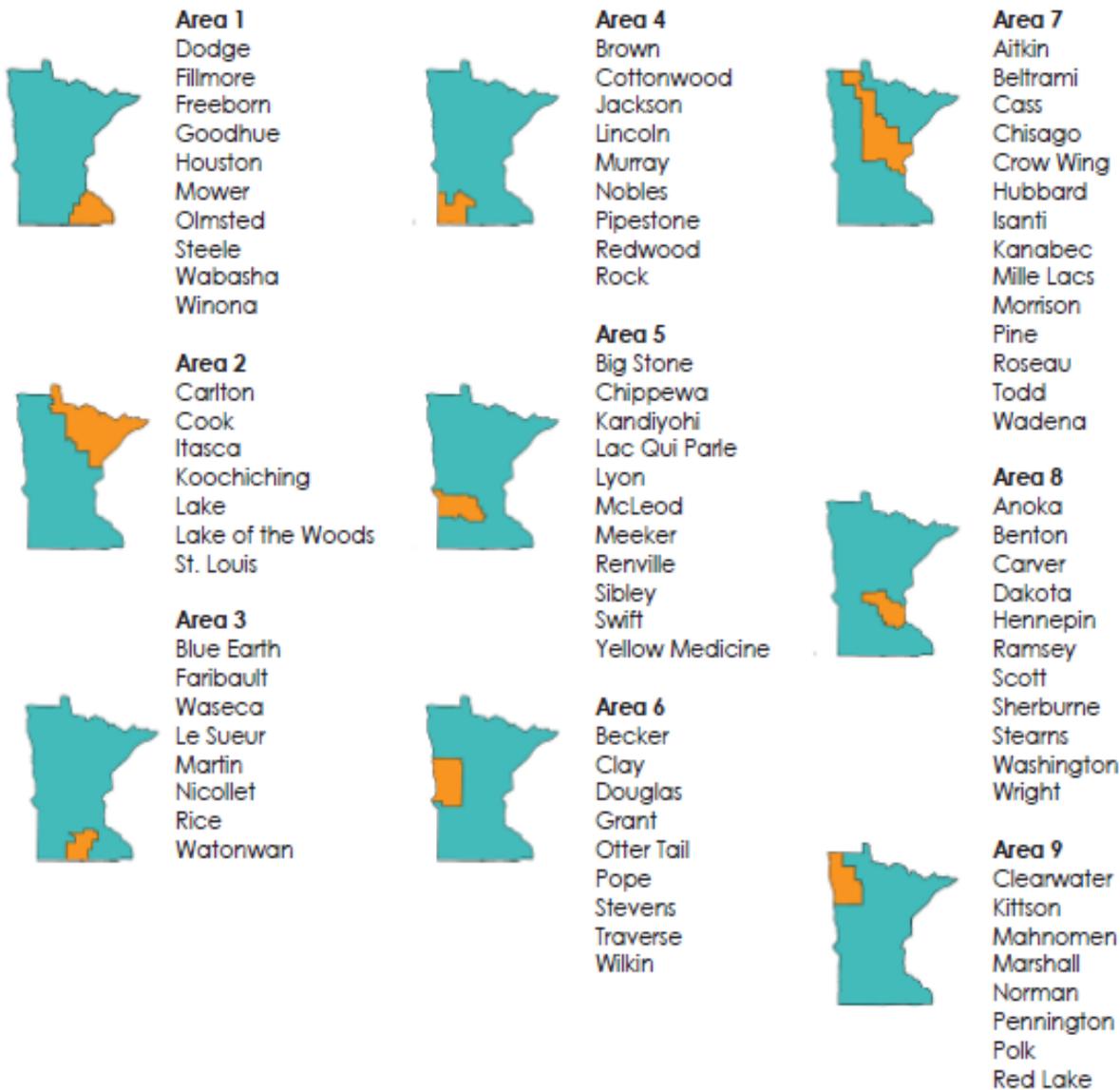
YEAR THREE: Jane now has an increased Plan Annual Maximum of \$2,200. This year, she submits \$2,100 in claims. All claims are paid due to the Maximum Rollover Amount accumulated.

YEAR FOUR: Jane’s Plan Annual Maximum is \$1,600 (\$1,500 Plan Annual Maximum + \$100 remaining Maximum Rollover Amount accumulated)



MNsure Health Insurance Plan Rates By Region

There are 9 insurance rate pricing regions in Minnesota



NOTE: This plan is not offered in Cook, Itasca, Lake of the Woods, Lincoln, Pipestone, and Saint Louis counties.



NEED HELP WITH YOUR ENROLLMENT PACKET? Contact your Broker or visit www.mnsure.org or Contact MNsure at 1-855-366-7873.