

Trustees of the Printers' Disability Trust

Dental Summary

Proposed Effective Date: 3/1/2022

Plan Benefit		Low Plan	High Plan
	Type 1	80%	100%
	Type 2	60%	80%
	Type 3	40%	50%
Deductible		\$50/Calendar Year (waived type 1)	\$50/Calendar Year (waived type 1)
Maximum (per person)		\$1,000/Calendar Year	\$1,500/Calendar Year
PPO		Passive PPO	Passive PPO
Max BuilderSM		Included	Included
Waiting Period		None	None
Annual Open Enrollment		Included	Included
Type 1 Procedure (Frequency)		<ul style="list-style-type: none"> • Routine Exam (2 per benefit period) • Bitewing X-rays (2 per benefit period) • Full Mouth/Panoramic X-rays (1 in 3 years) • Periapical X-rays • Cleaning (2 per benefit period) • Fluoride for Children 18 and under (1 per benefit period) • Sealants (age 16 and under) • Space Maintainers 	<ul style="list-style-type: none"> • Routine Exam (2 per benefit period) • Bitewing X-rays (2 per benefit period) • Full Mouth/Panoramic X-rays (1 in 3 years) • Periapical X-rays • Cleaning (2 per benefit period) • Fluoride for Children 18 and under (1 per benefit period) • Sealants (age 16 and under) • Space Maintainers
Type 2 Procedure (Frequency)		<ul style="list-style-type: none"> • Restorative Amalgams • Restorative Composites • Endodontics (surgical & nonsurgical) • Periodontics (surgical & nonsurgical) • Denture Repair • Simple & Complex Extractions • Anesthesia 	<ul style="list-style-type: none"> • Restorative Amalgams • Restorative Composites • Endodontics (surgical & nonsurgical) • Periodontics (surgical & nonsurgical) • Denture Repair • Simple & Complex Extractions • Anesthesia
Type 3 Procedure (Frequency)		<ul style="list-style-type: none"> • Onlays • Crowns (1 in 5 years per tooth) • Crown Repair • Prosthodontics (fixed bridge; removable complete/partial dentures) (1 in 5 years) 	<ul style="list-style-type: none"> • Onlays • Crowns (1 in 5 years per tooth) • Crown Repair • Prosthodontics (fixed bridge; removable complete/partial dentures) (1 in 5 years)

Above is a sample list of dental procedures payable under the plan. A complete list of procedures is available from your Sales Representative.

Orthodontia Summary- Child only - up to age 19

Allowance All Plan Designs: In Network, discounted fee. Out of Network, U&C.	
Plan Benefit	No Ortho
Coverage for Adults	50%
Lifetime Maximum (per person)	No
Waiting Period	\$1,500
	None

Current Dental Terminology © American Dental Association.

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Features/Benefits

Max BuilderSM

This dental plan includes a valuable feature that allows qualifying plan participants to carryover part of their unused annual maximum. A participant earns dental rewards by submitting at least one claim for dental expenses incurred during the benefit year, while staying at or under the threshold amount for benefits received for that year. In addition, a person earning dental rewards who submits a claim for services received through the dental network earns an extra reward, called the PPO Bonus. Employees and their covered dependents may accumulate rewards up to the stated maximum carryover amount, and then use those rewards for any covered dental procedures subject to applicable coinsurance and plan provisions. If a plan participant doesn't submit a dental claim during a benefit year, all accumulated rewards are lost. But he or she can begin earning rewards again the very next year.

Plan 1		
Benefit Threshold	\$500	Dental benefits received for the year cannot exceed this amount
Annual Carryover Amount	\$250	Max Builder amount is added to the following year's maximum
Annual PPO Bonus	\$100	Additional bonus is earned if the participant sees a network provider
Maximum Carryover	\$1,000	Maximum possible accumulation for Max Builder and PPO Bonus combined
Plan 2		
Benefit Threshold	\$750	Dental benefits received for the year cannot exceed this amount
Annual Carryover Amount	\$250	Max Builder amount is added to the following year's maximum
Annual PPO Bonus	\$100	Additional bonus is earned if the participant sees a network provider
Maximum Carryover	\$1,000	Maximum possible accumulation for Max Builder and PPO Bonus combined

Groups with a program similar to Max Builder on their previous plan are eligible for Max Builder Credits. To qualify for Max Builder Credits, the employer must request a list of carryover amounts from the previous carrier, to be sent to The Standard. (Plan(s): Low Plan 1; High Plan 1)

The Standard will credit each account based on amounts identified by the previous carrier. The credit is available only to initial insureds. The credit, and any amounts earned under our plan, will not exceed the maximum carryover proposed for the plan selected. (Plan(s): Low Plan 1; High Plan 1)

Enrollment data must include information for all dependents enrolling in the plan. (Plan(s): Low Plan 1; High Plan 1)

High/Low Plan

High/Low Plans let you offer your employees a choice between two plans, two premium levels, in one policy. Your employees select the plan that best suits their coverage and financial needs.

- On the March 1, 2022, effective date, all eligible employees may choose between the High Plan or the Low Plan shown in this proposal, or choose to waive coverage. The employee must remain in the plan he or she chose until the next renewal date. At each annual election period, employees may switch between the High Plan and the Low Plan without penalty.

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Features/Benefits

The Standard's Preferred Care Dental Products

- Employers achieve a balance between cost efficiency and employee choice.
- Plan participants are free to receive care from any dentist they choose. Their out-of-pocket expenses are generally lower when using network providers, who have agreed to provide dental care at discounted fees.
- Our plans give participants across the nation over 472,000 provider access points for dental care.
- Network providers must meet credentialing and quality assurance requirements.

Usual and Customary (U&C)

The Usual and Customary (U&C) allowance listed on the plan summary page is determined using information including data from a nationally recognized independent data source. Plan participants are reimbursed based on the appropriate charges in the dentist's ZIP Code area. U&C allowances are reviewed annually.

- 90th U&C means 9 out of 10 dentists in a specific ZIP Code area charge at or below the plan allowance for a procedure.

Deductibles

After the date that \$150 in accumulated deductibles has been met within a family, we will waive the entire deductible or any remaining portion of the deductible amount for any other family members for the rest of that calendar year. At no time can a family member contribute more than the selected deductible amount. (Plan(s): Low Plan 1; High Plan 1)

This form is a benefit highlight, not a certificate of insurance. This policy has exclusions, limitations, reductions of benefits, and terms under which the policy may be continued in force or terminated. Please contact The Standard or your employer for additional information, including costs and complete details of coverage.