



Medico® Dental Plus Insurance Series
Traditional Dental Plan

Policy Highlights

We offer affordable plan choices under the Medico® Dental Plus Insurance Series to help your client protect their overall health while providing coverage for services Medicare doesn't cover. The Traditional Dental Plan is one of the three plans offered in the Series, providing only dental coverage. Although your client can see any provider in any state under this Plan, there is also a Dental Network which could help your client save on dental services. (The Dental Network is not available in Georgia.)

Issue Ages	18 – 89 age last birthday
Policy Effective Date	The Effective Date can be any day from the 1 st through the 28 th of the month, and must be less than 90 days after the Application date.
Guaranteed Issue	Guaranteed Issue – No Underwriting. A short application is used. Online Application available on our electronic application and quoting engine, MyEnroller SM
Rates	Unisex rate calculation
Premiums (No Policy Fee)	Automatic Bank Withdrawal: Monthly, Quarterly, Semi-Annual and Annual - premium will be drafted the evening of the effective date of coverage Direct Bill: Quarterly, Semi-Annual and Annual Credit Card (Visa or Master Card): Monthly, Quarterly, Semi-Annual and Annual - premium will be charged the evening of the effective date of coverage
Policy Year Deductible	\$100 Policy Year Deductible
Policy Year Maximum	\$1,000 Policy Year Maximum
Dental Benefits	After the \$100 Policy Year Deductible is satisfied and subject to any waiting periods, the policy will pay the following percentage of the actual charges, not to exceed Reasonable and Customary Charges for Eligible Expenses, up to the Policy Maximum Benefit based on the Policy Year: <ul style="list-style-type: none">• Diagnostic and Preventive Services 100%• Basic Services 50%• Major Services 50%
Dental Benefits Waiting Periods	<ul style="list-style-type: none">• Benefits will be payable for the following services after a Three Month Waiting Period:<ol style="list-style-type: none">1. Dental Cleanings including exam (2 times per Policy year)2. Bitewing X-rays (1 set (4 images) per Policy year)• Benefits will be payable for the following services after a Six Month Waiting Period:<ol style="list-style-type: none">1. Diagnostic X-rays (refer to Policy for limitations)2. Fillings (1 per tooth surface in any 2 Policy years)3. Non-surgical extractions (up to 4 teeth per Policy year, combined with surgical extractions)4. Palliative care (2 services per Policy year)• Benefits will be payable for the following services after a Twelve Month Waiting Period:<ul style="list-style-type: none">1. Inlays/Onlays/Crowns2. Endodontic services including root canals3. Periodontal Services including maintenance cleaning, scaling, root planing and periodontal surgeries4. Prosthodontic services including fixed bridges, dentures and related services5. Surgical extractions – erupted teeth (up to 4 teeth per Policy year, combined with non-surgical extractions) <p>*Refer to Policy for a complete listing of benefits and limitations.</p>

Provider Services	<p>No Network Requirement – policyholder may see any provider.</p> <p>Medico® Insurance Company does provide a Passive Dental PPO (not available in Georgia). For services provided by a Participating Dentist, we will pay benefits based on the contracted fee for service with the PPO for dental procedures and services after any required Policy Year Deductible is satisfied and subject to any waiting periods. For a listing of providers visit www.careington.com/co/maxcare.</p> <p>For services provided by a Non-Participating Dentist, we will pay benefits based on the actual charges submitted for dental procedures and services, not to exceed Reasonable and Customary, after any required Policy Year Deductible is satisfied and subject to any waiting period.</p> <p>Whether the policyholder utilizes a network provider or not, the benefit percentages remain the same.</p>
Exceptions and Limitations	Please refer to the Policy for a complete listing of Exceptions and Limitations
30-Day Right to Examine	The policyholder has 30 days after they have received the Policy to examine it and return it to Medico or to the Producer if they are dissatisfied. Medico will refund the premium, minus any claims paid and void the Policy.

This Policy has limitations and exclusions. For complete details of the coverage, please review the Policy contract. Policy availability features and rates may vary by state. Dental insurance is not a substitute for health insurance. This Policy may not be appropriate for Medicaid recipients. When used herein, “Policy” refers to either the Policy or Certificate.

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INSURANCE COMPANY





Medico® Dental Plus Insurance Series
Preferred Dental Plan

Policy Highlights

We offer affordable plan choices under the Medico® Dental Plus Insurance Series to help your client protect their overall health while providing coverage for services Medicare doesn't cover. The Preferred Dental Plan is one of the three plans offered in the Series, providing coverage for dental, vision and hearing services. Although your client can see any provider in any state under this Plan, there is also a Dental Network which could help your client save on dental services. (The Dental Network is not available in Georgia.)

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Policy Year Deductible	\$100 Policy Year Deductible
Policy Year Maximum	\$1,500 Policy Year Maximum
Dental Benefits	After the \$100 Policy Year Deductible is satisfied and subject to any waiting periods, the policy will pay the following percentage of the actual charges, not to exceed Reasonable and Customary Charges for Eligible Expenses, up to the Policy Maximum Benefit based on the Policy Year: <ul style="list-style-type: none">• Diagnostic and Preventive Services 80%• Basic Services 80%• Major Services 50%
Dental Benefits No Waiting Period	<ul style="list-style-type: none">• Dental Cleanings including exam (2 times per Policy Year)• Bitewing X-rays (1 set (4 images) per Policy Year)
Dental Benefits Waiting Periods	<ul style="list-style-type: none">• Benefits will be payable for the following services after a Six Month Waiting Period:<ol style="list-style-type: none">1. Diagnostic X-rays (refer to Policy for limitations)2. Fillings (1 per tooth surface in any 2 Policy years)3. Non-surgical extractions (up to 4 teeth per Policy year, combined with surgical extractions)4. Palliative care (2 services per Policy year)• Benefits will be payable for the following services after a Twelve Month Waiting Period: *<ol style="list-style-type: none">1. Inlays/Onlays/Crowns2. Endodontic services including root canals3. Periodontal Services including maintenance cleaning, scaling, root planing and periodontal surgeries4. Prosthodontic services including fixed bridges, dentures and related services5. Surgical extractions – erupted teeth (up to 4 teeth per Policy year, combined with non- surgical extractions) <p>*Refer to Policy for a complete listing of benefits and limitations.</p>

Vision Waiting Periods and Benefits	<ul style="list-style-type: none"> • Benefits will be payable for the following items after a Twelve Month Waiting Period: <ul style="list-style-type: none"> • Eye examination • Eye refraction • Eyeglasses or contact lenses (including the renewal or changing of prescriptions). <p>Vision benefits, including exam or refraction, are payable at 50%, up to the maximum benefit amount of \$200 over 2 Policy years, and subject to the Policy year maximum benefit amount.</p>
Hearing Waiting Periods and Benefits	<ul style="list-style-type: none"> • Benefits will be payable for the following items or services after a Twelve Month Waiting Period: <ul style="list-style-type: none"> • Hearing Exams • Hearing Aids • Hearing Aid repairs <p>Hearing benefits are payable at 50%, up to the maximum benefit amount of \$500 per Policy year, and subject to the Policy year maximum benefit amount.</p>
Provider Services	<p>No Network Requirement – policyholder may see any provider.</p> <p>Medico® Insurance Company does provide a Passive Dental PPO (not available in Georgia). For services provided by a Participating Dentist, we will pay benefits based on the contracted fee for service with the PPO for dental procedures and services after any required Policy Year Deductible is satisfied and subject to any waiting periods. For a listing of providers visit www.careington.com/co/maxcare.</p> <p>For services provided by a Non-Participating Dentist, we will pay benefits based on the actual charges submitted for dental procedures and services, not to exceed Reasonable and Customary, after any required Policy Year Deductible is satisfied and subject to any waiting period.</p> <p>Whether the policyholder utilizes a network provider or not, the benefit percentages remain the same.</p>
Exceptions and Limitations	Please refer to the Coverage Schedule for a complete listing of all Exceptions and Limitations
30-Day Right to Examine	The policyholder has 30 days after they have received the policy to examine it and return it to Medico or to the Producer if they are dissatisfied. Medico will refund the premium, minus any claims paid and void the policy.

This policy has limitations and exclusions. For complete details of the coverage, please review the policy contract. Policy availability features and rates may vary by state. Dental, Vision & Hearing insurance is not a substitute for health insurance. This policy may not be appropriate for Medicaid recipients. When used herein, “policy” refers to either the policy or certificate.

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Policy Year Maximum	\$2,500 Policy Year Maximum
Dental Benefits	After the \$100 Policy Year Deductible is satisfied and subject to any waiting periods, the policy will pay the following percentage of the actual charges, not to exceed Reasonable and Customary Charges for Eligible Expenses, up to the Policy Maximum Benefit based on the Policy Year: <ul style="list-style-type: none"> • Diagnostic and Preventive Services 80% • Basic Services 80% • Major Services 50%
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