

2020

GUARDIAN DENTAL GUARD

IN-NETWORK COVERAGE * (Dentist is a participating Provider with The Guardian)

100% Preventive Services Teeth Cleaning Fluoride treatments for Children Space maintainers Emergency Treatment Oral Examinations X-Rays Topical Sealants	\$50 Per Person Benefit Year Deductible		50% Orthodontic Services Children to age 19 Active Orthodontic Appliances All other orthodontic services
	100% Basic Services Laboratory tests Fillings- Amalgam, Silicate, and Acrylic Stainless steel Crowns Diagnostic Casts	60% Major Gold and porcelain Installation of bridge work and crowns Periodontal Services Extractions & other Oral Surgery Periodontal Surgery Endontics Root canal Repair and Main. of Bridgework & Dentures	
		40% copayment	\$1,500 Lifetime Maximum
\$1,000 Per Person Calendar Year Maximum			

OUT-OF-NETWORK COVERAGE

*(Dentist is not participating Provider with The Guardian)

100 %* Preventive Services Teeth Cleaning Fluoride treatments for Children Space maintainers Emergency Treatment Oral Examinations X-Rays Topical Sealants	\$50 Per Person Benefit Year Deductible		50%* Orthodontic Services Children to age 19 Active Orthodontic Appliances All other orthodontic services
	80%* Basic Services Laboratory tests Fillings- Amalgam, Silicate, and Acrylic Stainless steel Crowns Diagnostic Casts	50%* Major Services Gold and porcelain Installation of bridge work and crowns Periodontal Services Extractions & other Oral Surgery Periodontal Surgery Endontics Root canal Repair and Main. of Bridgework & Dentures	
		20% copayment	\$1500 Lifetime Maximum
\$1,000 Per Person Calendar Year Maximum			

Monthly Premiums: Individual \$57.75 Family \$165.18