

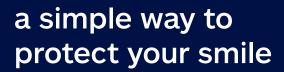


# dental indemnity

Cash benefits to help you pay for dental care. Plus, an optional Network Savings Card to keep more in your pocket.









Dental coverage is not always included in medical plans. At Allstate Health Solutions, we don't think anyone should go without quality dental coverage. That's why we offer an option that's easy to add to any medical plan, on any budget.

Dental Indemnity coverage gives you a predictable way to pay for things like checkups and treatments. You choose a plan with set dollar amounts, and we'll pay for covered dental services. Any expenses beyond your set amounts are paid by you.

Want to keep even more cash in your pocket? Add our Network Savings Card and save an average of 45% on dental care from in-network providers.<sup>1</sup> And that's savings on top of the cash benefits you'll already get paid from our Dental Indemnity plan.

# Benefits in every plan

Everyday dental care	Basic and preventative services covered in every plan; from cleanings to x-rays to fillings and more.
No waiting periods	All dental care is covered from day one; exceptions for major services in the Plus plan.
Plans for all ages	Dental coverage is available from birth to age 94. Benefits can cover you, your spouse, and any dependent children. <sup>2</sup>
Predictable, set payments	You know exactly what your plan will pay for, from an exam and fillings, to extractions and more.
Network Savings Card	Add this option to your dental plan and save more, from routine care to major work. Plus, vision discounts help you save on eye care.

The plan DOES NOT meet the pediatric dental coverage level requirements as mandated by the Affordable Care Act. Pediatric dental coverage that meets the Affordable Care Act's coverage level requirement may be purchased through your state's marketplace or your insurance agent.

 $<sup>^{\</sup>rm 1}$  Based on the average of the assigned Maximum Care (DN14) fees for all U.S. ZIP codes.

<sup>&</sup>lt;sup>2</sup> Enrollment age for spouses is 14 through 94; for child dependents, birth through 24.

# pick the right plan for you

All three Dental Indemnity plans include preventive and basic services, with benefits that start day one. Preventive services do not affect your annual benefit maximum.

	Basic plan	Intermediate plan	Plus plan
Preventive services <sup>3</sup>			
Exams, x-rays, cleaning	\$75/visit	\$100/visit	\$100/visit
Basic services⁴			
Filling	\$75	\$150	\$150
Extraction, Erupted tooth or exposed root	\$50	\$100	\$100
Reline complete denture (laboratory)	\$150	\$300	\$300
Major services⁵			
Inlay; metallic; two surfaces	-	-	\$330
Crown; resin	-	-	\$450
Retreatment of previous root canal therapy	-	-	\$250
Complete denture	-	-	\$375
Maxillary sinusotomy	-	-	\$825
Annual benefit maximum	\$500	\$1,000	\$1,500

Amounts may vary by procedure code.

 $<sup>^{\</sup>rm 3}$  Two visits per person each calendar year, separated by at least 150 days.

<sup>&</sup>lt;sup>4</sup> Payments are 50% of the listed benefit in the first policy year and 100% thereafter.

<sup>&</sup>lt;sup>5</sup> For the Plus plan, there is a 180-day waiting period on major services in most states, except Kansas. After the waiting period, payments are 50% of the listed benefit for the remainder of the first policy year and 100% thereafter. Major services are not covered under Basic or Intermediate plans.

# add our network savings card

Save an average of 45% on dental care. Plus, savings on eye care and eyewear.

# Get more reasons to smile with discounts on:

- All dental services, from routine exams and cleanings to major work such as dentures, root canals, and crowns.
- Eye care and eyewear through the Vision Pass Savings discount program.
- Set rate of \$50 for eye exams.6
- 5% savings on contact lens exams.<sup>7</sup>
- Special pricing on complete pairs of glasses and sunglasses.

#### How it works

Let's say you have the Dental Indemnity Plus plan. In your second year of the plan, you crack a tooth, and need a crown. Getting a crown is considered a major dental service, and that's covered under your plan. The dentist charges you \$1,068, which exceeds the amount covered by your plan. By combining your plan with our Network Savings Card, you will significantly reduce the amount you owe.

Total cost for a crown	\$1,068
Amount paid by dental plan	(\$450)
In-network savings: (with network savings card)	(\$342)
Total cost to you	\$276

### Careington Maximum Care Dental Network

With your Network Savings Card, you'll get access to, and savings from, one of the largest national dental networks. And with a focus on neighborhood dentists, it's easy to find a provider near you.

Find a dental provider at: all statehealth.solutions simplified.com

Not available in UT, VT and WA.

If you cancel your dental plan, your Network Savings Card is canceled, as well.

<sup>&</sup>lt;sup>6</sup> This cost is only available with the purchase of a complete pair of prescription glasses. Otherwise, the 20% applies to the eye exam only.

<sup>&</sup>lt;sup>7</sup> Applies to contact lens exam, not materials. You're responsible for 100% of the cost of contact lenses.

# limitations and exclusions



These plans provide limited benefits for specified dental services and treatments, are not a major medical insurance plan and do not provide benefits for:

- Any procedure or treatment not shown on the list of covered services.
- Procedures before the effective date, after the termination date of coverage, or in excess of the maximum calendar year benefit.
- Any procedure performed by an immediate family member or a person other than a dentist or dental hygienist or, in Idaho, a denturist.
- Any service that is not required for the preservation or restoration of oral health.
- · Experimental or investigative services.
- Preventive services performed within 150 days of previously submitted preventive services.
- Repairs to dental work within 180 days of the initial procedure.
- Replacement prosthetics, crowns, inlays or onlays within five years of the previous placement.
- · Dental implants or the removal of implants.
- Cosmetic services, unless performed to correct a functional disorder.
- · Orthodontic treatment and services.
- Services performed outside the United States, its territories and Canada, except for emergency dental treatment
- Replacement of any tooth missing prior to the effective date.
- Placement of full or partial dentures, including a Maryland Bridge, unless replacing a functioning natural tooth extracted while you were covered.
- Inlays, onlays, bridgework or crowns for those under age 16, except for stainless steel or plastic crowns.

Any procedure or treatment required due to:

- · War or any act of war.
- Participation in the military service of any country or international organization
- · Attempted suicide or self-inflicted sickness or injury.
- · Taking part in a riot or insurrection.
- · Participating in an illegal occupation or activity.
- Voluntary use of any controlled substance, except when taken as instructed by a physician.
- Riding in any aircraft not licensed to carry passengers or not operated by a duly licensed pilot.
- Operating a motor vehicle while your blood alcohol level was over the legal limit.

Coverage is renewable provided you have not moved to a state where we do not offer this plan or no longer qualify as a dependent. National General Accident & Health has the right to change premium rates upon providing appropriate notice.

THIS POLICY IS NOT A MEDICARE SUPPLEMENT POLICY. If you are eligible for Medicare, review the Guide to Health Insurance with Medicare available at www.medicare.gov/Publications/Pubs/pdf/02110.pdf.

#### Summary of benefits

This is a brief description of your coverage. Policies have exceptions and limitations that may limit coverage. For a complete description of benefits, exceptions and limitations, please read your Outline of Coverage and your policy. The premium rate may vary between plans. Coverage ceases upon termination of the policy.

THIS PLAN IS NOT INSURANCE and is not intended to replace health insurance. This plan does not meet the minimum creditable coverage requirements under M.G.L. c.111M and 956 CMR 5.00. This plan is not a Qualified Health Plan under the Affordable Care Act. The range of discounts will vary depending on the type of provider and service. The plan does not pay providers directly. Plan members must pay for all services but will receive a discount from participating providers. The list of participating providers is at Careington.com/ NGAHDSavings. A written list of participating providers is available upon request. You may cancel within the first 30 days after effective date or receipt of membership materials (whichever is later) and receive a full refund. Discount Plan Organization and administrator: Careington International Corporation, 7400 Gaylord Parkway, Frisco, TX 75034; phone 800-441-0380.





## about

The Allstate Corporation (NYSE: ALL) is one of the largest publicly held personal lines insurers in the United States. As part of the Allstate Corporation, Allstate Health Solutions is focused on providing supplemental and short-term coverage options to individuals and associations. Allstate Health Solutions is the marketing name for products underwritten by National Health Insurance Company, Integon National Insurance Company, Integon Indemnity Corporation and American Heritage Life Insurance Company. These four companies, together, are authorized to provide health insurance in all 50 states and the District of Columbia. Each underwriting company is responsible for its respective products. National Health Insurance Company underwrites policies in AK, AL, AR, AZ, CA, DC, GA, IA, ID, IL, IN, KS, KY, LA, MA, MD, ME, MI, MN, MO, MS, MT, NC, ND, NE, OH, OK, OR, PA, SC, SD, TN, TX, UT, VA, WA, WI, WV, and WY. Integon Indemnity Corporation underwrites policies in FL. Products in CO and CT are underwritten by Integon National Insurance Company.



Plan availability varies by state.