

LIFEMAP EXPRESS GROUP DENTAL COVERAGE

Insurance options for groups of 2 to 9 in Washington

LifeMap Assurance Company® offers employers with 2 to 9 employees the employer-paid dental options or the ability to add voluntary dental to their benefits package when purchasing another employer-paid product. Our **Passive PPO** options provide plenty of choice and flexibility at affordable group rates.

1. Review the options

	Essential Plans (A, B, C, D)	Choice Plans (E, F)	Preferred Plans (G, H)	Choice Plans (I, J)
Deductible	\$50 per member; \$150 per family (Waived for Preventive services)			
Annual Maximums	\$1,000 or \$1,500*			\$1,500
Coinsurance levels	In-network: 100 / 80 / 50 or 80 / 60 / 50 Out-of-network: 90 th percentile UCR	In-network: 100 / 80 / 50 Out-of-network: 90 th percentile UCR or MAC	In-network: 100 / 80 / 50 Out-of-network: 90 th percentile UCR	In-network: 100 / 80 / 50 Out-of-network: 90 th percentile UCR
Waiting periods (Classes A, B, C)	Standard: None Late: 3, 6, 12 months			
Benefit Coverage				
Exams and Cleanings, including Perio Maintenance	Class A - Preventive; 2 per year		Class A – Preventive; 2 per year or 3 with certain diagnoses	Class A - Preventive; 2 per year
Fluoride	Class A - Preventive; 2 per year until 18			
X-rays	Class A - Preventive			
Space Maintainers	Class A - Preventive			
Sealants, Preventive Resin	Class A - Preventive			
Fillings	Class B - Restorative			
Periodontal Services	Class B - Restorative			
Endodontic Services	Class B - Restorative			
Oral Surgery	Class B - Restorative			
Crowns and Bridges	Class C - Major			
Dentures	Class C - Major			
Implants	Excluded	Class C - Major		
Plan I includes Orthodontia (Child coverage up to age 19 Available with 5-9 employees)	Not Available			12-month ortho waiting period (24 months for late enrollees) 50% ortho coinsurance Lifetime Ortho Max: \$1,000
Plan J Includes TMJ services	Not Available			6-month TMJ waiting period (12 months for late enrollees) 50% TMJ coinsurance Annual TMJ Max: \$1,000 Lifetime TMJ Max: \$5,000

*\$2,000 annual maximum option is available with Plan D or Plan H only when replacing coverage.

2. Choose your contribution level

Employer Contribution	Participation
100% Employer paid	100% required
50%-99% Employer paid	2 to 4 employees: 100% required
	5+ employees: 75% required (minimum 5)
Employer Contribution	Participation
<50% Employer Paid (Voluntary)	Greater of: 35% or 5 employees required

3. What's not covered

To keep costs down for everyone, we unfortunately can't cover everything. These are the exclusions for each dental plan we offer.

Exclusions and limitations:

- Benefits Not Stated
- Adjustment Denture or Bridgework within 6 Months
- Cosmetic and Reconstructive Services and Supplies
- Duplicate X-Rays
- Experimental and Investigational Services
- Facility Charges
- Fees, Taxes, Interest, etc.
- Home Health Aids
- Medication and Supply Charges
- Military Service-Related Conditions
- Motor Vehicle Coverage and Other Insurance Liability
- Non-Direct Patient Care
- Oral Hygiene and Dietary Instructions
- Oral Pathology and Laboratory
- Any Services Performed in a Laboratory
- Collection of Cultures and Specimens
- Orthodontic Dental Services
- Personal Comfort Items
- Precision Attachments, Personalization, Precious Metal Bases and Other Specialized Techniques
- Riot, Rebellion, War and Illegal Acts
- Self-Help, Non-Dental Programs
- Separate Charges
- Services Provided by Member of Immediate Family
- Services due to Intentionally Self-Inflicted Injury/Illness
- TMJ Treatment
- Third Party Liability
- Travel and Transportation Expenses
- Treatment Completed More than 30 Days after Coverage Terms
- Treatment Outside Generally Accepted Dental Practices
- Treatment started prior to the Member's Effective Date
- Work-Related Conditions
- Anything not specifically provided for in the policy may not be a covered benefit.

4. Submit a quote

Underwriting guidelines for Washington groups with 2 to 9 employees:

- Group must be a business (or an offshoot of a business) that has been in existence for at least 3 months for Life/AD&D and Dental
- No more than 50% of the group members may be from the same family, unless each has been employed with the employer for at least two years
- No more than 60% of the group members can be over age 50 years old
- A minimum of one employer-paid LifeMap product be purchased to offer voluntary dental
- Eligibility requirements: full time, active employee working a minimum of 30 hours per week
- Child coverage from birth to age 26 for unmarried children (Class A, B, and C services).
- One class is allowed
- This proposal is based on plans and rates currently on file and pending approval with the Office of the Insurance Commissioner in Washington State. Plans and Rates are not final and may be subject to change.

Submit your quote request and census to
Express.Quote@LifeMapCo.com



This document is intended to give a brief overview of the product and how it may be used. This in no way serves as a certification of coverage and should be used for education purposes only. A copy of the full policy including all covered benefits, exclusions and limitations will be provided once a group master application is signed. Contact LifeMap with any questions.