



DENTAL Insurance

from Physicians Mutual Insurance Company



Physicians
Mutual®

Insurance for all of us.®



Since 1902, Physicians Mutual Insurance Company has helped people like you face life's financial challenges with confidence.

LOOK FORWARD

to making insurance decisions with confidence.

Are big dental bills keeping you from going to the dentist?

You're not alone.

We know how expensive dental procedures can be. Since 2003, Physicians Mutual Insurance Company has helped pay dental bills for hundreds of thousands of Americans. People – like you – who need inexpensive dental insurance so they can get the care they deserve. We've been here for them. Listening. Answering questions. Empowering them with the guidance they need to make confident decisions about their insurance.

You, too, can count on us to be by your side, so you can look forward to feeling confident about your dental coverage – and your smile.



Look inside for details on how our dental insurance can help you, too.

["I live on a very fixed income, and I had to take out private dental insurance. I'm just tickled to death. I had all of the dental work that I needed. I feel so much stronger and more confident than I ever have in my life. It has made me feel fabulous, and I just wanted to let other customers know how very much I appreciate Physicians Mutual. Thank you so much."

Sherill J., MO,
Member of our family since 2013]



These benefits help keep our customers smiling.

It only costs about \$1 a day¹ to help protect yourself from dental bills.

- Helps cover over [350] procedures
- Choose any dentist
- No deductible
- No annual maximum on cash benefits
- Number of claims won't raise your rates
- Discounted rates available
- Opportunity to save a national average of [33%]² on covered services

| Covered Benefits... You Can Collect: | Procedure | \$ a month ³ Economy Plus Plan Pays | \$ a month ³ Standard Plus Plan Pays | \$ a month ³ Preferred Plus Plan Pays |
|---|---|---|--|---|
| Over [30] Preventive Benefits start immediately | Periodic Exam | \$34 | \$39 | \$44 |
| | Comprehensive Exam | \$41 | \$49 | \$57 |
| | Bitewing X-rays (2 films) | \$22 | \$27 | \$33 |
| | Bitewing X-rays (4 films) | \$29 | \$36 | \$44 |
| | Cleaning (adult) | \$49 | \$60 | \$71 |
| Over [100] Basic Benefits start after 3 months | Resin Filling (2 surface) | \$49 | \$66 | \$83 |
| | Resin Filling (4 surface) | \$68 | \$91 | \$116 |
| | Tooth Extraction (erupted tooth or exposed root) | \$35 | \$47 | \$60 |
| | Repair/Replace Partial Denture Clasp | \$50 | \$67 | \$84 |
| Over [200] Major Benefits start after 12 months | Crown (resin with noble metal) | \$302 | \$401 | \$501 |
| | Root Canal (permanent molar) | \$204 | \$279 | \$340 |
| | Fixed Bridge | \$302 | \$401 | \$501 |
| | Complete Upper Denture | \$236 | \$321 | \$392 |
| | Immediate Lower Denture | \$248 | \$337 | \$411 |

Save more money by choosing a participating dental provider in the Ameritas network. There are over [470,000] locations and you can save a national average of [33%]² on covered services.

Limitations can be found on the back of this brochure.

¹ Based on Economy Plus option for an individual.

² National averages are subject to change [October 2017]

³ Your premium may change at age 50, subject to the three-year rate guarantee.



You can also add important vision protection.

The Vision Benefit Rider gives you valuable eye care benefits and works right along with your dental coverage. Details are shown below. You can go to any participating provider you choose and get benefits for covered:

- Eye Exams – up to \$50 per person per year
- Vision Correction (Includes prescription: eyeglasses, sunglasses, sports glasses, spare pairs and contact lenses.)
 - Year 1:** up to \$50 per person
 - Year 2:** up to \$100 per person
 - Year 3 and beyond:** up to \$150 per person

Plus, at no additional cost to you, we've partnered with VSP to give you these discounts:

- 20% off a comprehensive exam
- 20% off glasses, lens options and sunglasses¹
- 15% off contact lens exam
- Up to 20% off laser surgery, including PRK, LASIK and Custom LASIK²

All discounts are subject to change.

This coverage is available for an additional cost. Please see limitations for complete details.

¹ Discounts valid through any VSP Preferred Provider within 12 months of the last covered eye exam; 20% discount is for complete pair of prescription glasses and non-prescription sunglasses.

² Custom LASIK discounts only available using wavefront technology with the microkeratome surgical device. Other LASIK procedures may be performed at an additional cost to the member. LaserVision Care discounts are only available from VSP-contracted facilities.



You can breathe easier with help from us.

Using our insurance is easy and inexpensive.

You have no deductible ...

There's no deductible to meet before we pay benefits, which can help reduce your out-of-pocket expenses.

You can't be turned down ...

You are preapproved for one of these insurance policies, even if you have current dental problems. Plus, there is no age limit, so the coverage can be yours for a lifetime!

Your premium rate has guarantees ...

The inexpensive price you pay today is locked in for three years; and it cannot go up because of how many claims you file or if your dental health changes.

You can receive discounted premium rates ...

Simply sign up to have payments taken automatically from your bank account and receive \$1.00 off your premiums every month – that's \$12.00 a year.

You can receive benefits right away ...

Preventive care benefits can be paid starting on day one, so you can use your insurance as soon as it's effective. You can collect benefits for basic care after three months and benefits for major care after 12 months.

You have no annual or lifetime maximum on the amount of benefits you can collect ...

There's no annual or lifetime maximum on how much money you can collect ... so there are no worries about receiving benefits year after year.

You can choose your dentist ...

You can go to any dentist you wish and the benefits paid to you won't change. If you do choose to use a dentist in our network of [470,000] provider locations, you can save a national average of [33%*] on covered services.

Real-life examples of using our insurance.

As soon as you get your coverage, you head to the dentist for a routine checkup. You can collect:

| Plan | Economy Plus | Standard Plus | Preferred Plus |
|------------------------|-----------------|-----------------|-----------------|
| Periodic Exam | \$34.00 | \$39.00 | \$44.00 |
| Cleaning | \$49.00 | \$60.00 | \$71.00 |
| X-rays (4 films) | \$29.00 | \$36.00 | \$44.00 |
| Total Benefits: | \$112.00 | \$135.00 | \$159.00 |

After 3 months of coverage, you have two cavities and need a tooth removed. You can collect:

| Plan | Economy Plus | Standard Plus | Preferred Plus |
|---------------------------|-----------------|-----------------|-----------------|
| Problem-focused Exam | \$19.00 | \$25.00 | \$32.00 |
| Resin Filling (4 surface) | \$68.00 | \$91.00 | \$116.00 |
| Resin Filling (4 surface) | \$68.00 | \$91.00 | \$116.00 |
| Simple Extraction | \$35.00 | \$47.00 | \$60.00 |
| Total Benefits: | \$190.00 | \$254.00 | \$324.00 |

After 12 months of coverage, you need a root canal and a crown. Our dental insurance can pay:

| Plan | Economy Plus | Standard Plus | Preferred Plus |
|------------------------|-----------------|-----------------|-------------------|
| Periodic Exam | \$34.00 | \$39.00 | \$44.00 |
| Cleaning | \$49.00 | \$60.00 | \$71.00 |
| X-rays PA (first film) | \$8.00 | \$11.00 | \$14.00 |
| Root Canal | \$204.00 | \$279.00 | \$340.00 |
| Crown Buildup | \$46.00 | \$62.00 | \$78.00 |
| Crown | \$302.00 | \$401.00 | \$501.00 |
| Total Benefits: | \$643.00 | \$852.00 | \$1,048.00 |

Your total cash benefits would be: **\$945.00** **\$1,241.00** **\$1,531.00**

Real questions. Real answers.

Straightforward information about our dental insurance.

Won't Medicare pay for my dental care?

Medicare doesn't cover routine dental care or most dental procedures such as cleanings, fillings or dentures. But our simple no-deductible dental insurance helps pay for these!

How much will this insurance pay?

Our insurance pays up to a fixed amount for each covered service, not a percentage, so you always know the exact amount you'll receive. You can also collect multiple benefits in just one visit. A complete list of benefits will come with your insurance packet.

Do I have to go to a dentist in your network?

No, you can use any dentist you choose and the benefits we pay to you won't change. We do have a network with over [470,000] dental providers available to you and you can receive a national average of [33%]* on covered services if you choose one of these providers.

If you don't have a dentist, this gives you a chance to shop around until you find a dentist you like who is reasonably priced, which helps you save money.

My dental office says they aren't a part of your network so they won't accept my insurance. What should I do?

This shouldn't happen, but if it does, don't worry – you can file the claim yourself. Some dental offices get confused because they're accustomed to being part of certain networks. If they don't belong to a company's network, they assume the insurance won't pay benefits.

With our insurance, you can choose any dentist. So we still pay benefits for covered services ... even if the dental office says they don't accept our insurance.

Does the coverage end if I change jobs or retire?

No, this insurance is not tied to your job. It's a great way to replace an employer's dental insurance that ends when you change jobs or retire.

I've seen insurance plans that only give discounts on services. Is this insurance like that?

This is real insurance protection. That means you can receive cash benefits, no matter which dentist you visit. However, if you decide to choose from one of our [470,000] provider locations, you can save a national average of [33%]* on covered services.

How many times a year can I get my teeth cleaned?

Because we care about your dental health, we provide coverage that helps pay for up to two cleanings per year. Remember, preventive benefits start right away, so you can schedule a cleaning today.

Is the Vision Benefit Rider more than a discount program?

Yes! It pays cash benefits for eye exams, glasses, contacts, spare pairs and more. Plus, it offers important discounts when seeing a VSP provider.

Here's an example of how you can save.

| Dental Service | National Average Charge** | – | Average Network Discount | = | Dental Charge | – | Economy Plus Plan Benefit | = | Your Final Cost |
|------------------|---------------------------|---|--------------------------|---|---------------|---|---------------------------|---|-----------------|
| Checkup Exam | \$46.30 | – | \$17.39 | = | \$28.91 | – | \$34.00 | = | \$0.00 |
| Cleaning | \$83.59 | – | \$25.08 | = | \$58.51 | – | \$49.00 | = | \$9.51 |
| Four Film X-rays | \$59.40 | – | \$21.66 | = | \$37.74 | – | \$29.00 | = | \$8.74 |
| | | | | | | | Total | = | \$18.25 |

* National averages are subject to change [October 2017]

** National averages provided by Ameritas and are subject to change, [October 2017.]



**Physicians
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Insurance for all of us.®

Additional information you should know.

Coverage and rate protection: Your rates will not go up, nor your coverage canceled, because of how many claims you file. Changes in coverage (not in SD) or rates will apply to all insurance types of this form (not in SC: and class) in the state where you live. We will not increase your renewal premium for at least three years from the policy effective date shown in the schedule unless you request a change in your policy benefits or riders, change your premium mode or frequency, or there is a change in dependent status. Your premium may change at age 50, subject to the three year rate guarantee.

Automatic renewal of coverage: We guarantee to renew your coverage on an individual basis unless you commit fraud or intentional misrepresentation. (C250A only: your eligibility for coverage ends) or you fail to pay the premium when due. The only other way your coverage could be canceled is if it is canceled for all other insurance types of this form and class in the state where you live.

What is limited or not covered: This dental insurance pays benefits for covered services and is neither designed nor intended to pay all costs associated with dental care. No benefits under the insurance are payable or considered a covered expense for any of the following: 1) Expense incurred during any waiting period (and while the insurance policy is not in force for P150). 2) Any treatment which is for cosmetic purposes. Facings on crowns or pontics beyond the second bicuspid are considered cosmetic. 3) Replacement of any prosthetic appliance, crown, inlay or onlay restoration, or fixed partial denture within five years of the date of the last placement of these items; unless a) replacement is required due to an accidental injury sustained while a covered person's coverage is in force; and b) replacement occurs while such covered person's coverage is in force. 4) Initial placement of any prosthetic appliance or fixed partial denture unless such placement is needed because of the extraction of one or more teeth while the covered person is insured under this insurance. But the extraction of a third molar (wisdom tooth) will not qualify under the above. Any such appliance or fixed partial denture must include the replacement of the extracted tooth or teeth. 5) Any procedure started before the covered person was insured under this coverage. 6) Any procedure started after the covered person's insurance under this insurance terminates; or for any prosthetic dental appliances installed or delivered more than 90 days after the covered person's insurance under this coverage terminates. 7) The replacement of lost or stolen appliances. 8) Appliances, restorations, or procedures to a) alter vertical dimension; b) restore or maintain occlusion; or c) splint or replace tooth structure lost as a result of abrasion or attrition. 9) Any procedure which is not shown in the schedule. 10) Orthodontic treatment (except as needed as a result of cleft lip or cleft palate, in SC). 11) Sealants which are a) not applied to a permanent molar; b) applied after attaining the age of 17; or c) reapplied to a molar within 3 years from the date of a previous sealant application. 12) Periodontal scaling and root planing unless the presence of periodontal disease is confirmed by both x-ray films and pocket depth summaries of each tooth involved. 13) Injury or sickness arising out of, or in the course of, work for wage or profit, for which the covered person receives benefits under any Worker's Compensation Act or similar laws (In KS: care, treatment, services, supplies or drugs for Injury or Sickness related to a covered person's job to the extent the covered person is covered or is required to be covered by the Workers' Compensation law. If the covered person enters into settlement giving up his/her rights to recover further medical benefits under a Workers' Compensation law, the policy will not pay those medical benefits that would have been payable in absence of that settlement; In NC: services or supplies for the treatment of an Occupational Injury or Sickness which are paid under the North Carolina Workers' Compensation Act only to the extent such services or supplies are the liability of the employee, employer or Workers' Compensation insurance carrier according to the final adjudication under the North Carolina Workers' Compensation Act or an order of the North Carolina Industrial Commission approving a settlement agreement under the North Carolina Workers' Compensation Act; In SD: Injury or Sickness for which benefits are paid under any Worker's Compensation Act or similar laws). 14) Charges for which the covered person is not liable or which would not have been made had no insurance been in force (has no legal liability to pay, in TX). 15) Services which are not recommended by a dentist/physician or which are not required for necessary care and treatment. 16) War or any act of war, declared or not (when serving in the military or an auxiliary until attached thereto, in OK). 17) SD only: for services provided by a Family Member, unless: a) The Family Member is a Physician; b) The Family Member is a regular employee of the organization furnishing the service or care; c) The organization receives the payment for the services; and d) The Family Member receives no compensation other than the normal compensation for employees in his or her job category.

The Participating Providers and Preventive Benefits Rider will not pay benefits for: (a) procedures not payable under the Certificate/Policy; (b) procedures not listed in the Rider Benefits provision; or (c) expense incurred while this Rider is not in force. If the provider discounted fee at the Participating Provider or the actual charge at a Non-Participating Provider is greater than the benefits paid by us, you are responsible for the difference.

If the provider discounted fee at the Participating Provider or the actual charge at a Non-Participating Provider is greater than the benefits paid by us, you are responsible for the difference.

Alternative procedures: If two or more procedures are adequate and appropriate treatment to correct a certain condition, your benefit amount may be limited to that available for the least expensive procedure.

In addition to any Policy Limitations, We will not pay Vision Benefits for: 1. Eye examinations performed or correction materials ordered for a Covered Person while their coverage is not in force; or 2. Expenses incurred for missed appointments; or 3. Subnormal vision aids; orthoptic or vision training or any associated testing; or 4. Medical or surgical treatment of the eyes. Eye examinations must be performed by an optometrist or ophthalmologist. Covered vision correction materials do not include items available for purchase without a prescription.

Third Party Discount Details: We arrange for a third party to give you access to discounted goods and service such as vision exams and material discounts. Access to these discounts will discontinue upon termination of this rider or our arrangement with such third party.

This is limited-benefit insurance. Coverage form numbers, options and benefits vary by state. Ask your agent/producer for cost and full details. This is a solicitation of insurance for product series C250A/B424/B438; P150/B426/B439 (OK: P1500K; TN: P150TN; TX: P150TX). An insurance agent/producer will contact you.
Insurance Agent/Producer License # _____

**Coverage that helps provide peace of mind –
with outstanding customer service you
can count on.**

That's ... Insurance for all of us.®

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