

A woman with long brown hair, wearing a green top, is sitting in a white dental chair. She is smiling and looking towards the left. She is holding a white clipboard with a blue pen. The background is a bright, clean dental office.

Ohio-Kentucky HMO Small Group Dental Rates

*(January 1, 2010 through December 31, 2010) • Small Groups (2-19) Eligible Employees
Applies to Ohio and Kentucky*

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Dental Care
PLUS

HMO Small Group (2-19) Eligible Employees

Good through December 31, 2010

Ohio-Kentucky

	Option 1		Option 2		Option 3	
Copay -Routine Oral Exams/Cleanings	\$10		\$10		\$15	
Deductible	\$50/150		\$50/150		\$50/150	
Annual Max	\$1,000		\$1,000		\$1,000	
Preventive	100%		100%		100%	
Basic	80%		50%		50%	
Major	50%		50%		25%	
Ortho (optional)	50% to \$1000		50% to \$1000		50% to \$1000	
Endodontic & Periodontic	Major		Basic		Major	
Without Orthodontia						
	Contributory	Voluntary	Contributory	Voluntary	Contributory	Voluntary
Employee	\$19.77	\$21.75	\$17.80	\$19.58	\$15.89	\$17.48
EE/Sp	\$39.56	\$43.52	\$35.61	\$39.16	\$31.79	\$34.96
EE/Ch	\$36.60	\$40.25	\$32.94	\$36.22	\$29.40	\$32.34
Family	\$69.23	\$76.16	\$62.30	\$68.53	\$55.62	\$61.18
With Orthodontia (must have 5 employees enrolled on plan)						
Employee	\$19.77	\$21.75	\$17.80	\$19.58	\$15.89	\$17.48
EE/Sp	\$39.56	\$43.52	\$35.61	\$39.16	\$31.79	\$34.96
EE/Ch	\$40.07	\$44.07	\$36.06	\$39.66	\$32.19	\$35.41
Family	\$74.43	\$81.86	\$66.98	\$73.68	\$59.79	\$65.78
Options						
\$15 copay	Reduce 3%		Reduce 3%		Not Applicable	
\$20 copay	Reduce 5%		Reduce 5%		Reduce 5%	
Endodontics in Basic	Add 4%		Not Applicable		Add 4%	
Periodontics in Basic	Add 2%		Not Applicable		Add 2%	
To change deductible to \$25/75	Add 3.5%		Add 3.5%		Add 3.5%	

- Rates guaranteed for 12 months from time of initial effective date.
- Plan effective for the 1st of the month effective dates only.
- Customized plans for groups are available by contacting your local DCPG office.
- No waiting periods.
- Coverage for employees out of area not available.

Dental Care Plus Competitive Advantages

- The plan requires a minimum enrollment of 25% of the total eligible employees on initial implementation and on yearly anniversary date. This enrollment must represent a minimum of 2 contracts;
- Orthodontia is eligible for groups of five or more participating employees;
- Deductible applies to Basic and Major services only;
- Copay applies to preventive routine cleanings and oral exams only;
- Dependents are covered to age 19, regardless of school enrollment, and verified full-time students are covered to age 25;
- The DCPG discount vision plan is available at no extra charge and includes a plan with a schedule of costs – an extra convenience for enrollees;
- Contact your local DCPG office for enrollment material and implementation process;
- EFT required for groups 2-9 eligible.

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