

## Summary of Changes

*For Contracts issued with an effective date between January 1, 2020 and December 31, 2020*

The information contained in this summary represents a brief overview of the substantive changes made from your previous plan documents to your 2020 plan documents. The changes outlined below either represent a change in benefits or have been made to provide additional information, for clarity, or to ensure accuracy with how your Plan is administered.

*Please note – this document is being provided as a courtesy and is not part of your contract. The information below is not a complete listing of all changes. For a more complete listing of substantive changes, please request more detailed information from your Account Team.*

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### Benefit Changes

**Class II/III Restorative:** Criteria regarding the limitations of a crown buildup for non-endodontically and endodontically treated teeth has been revised for consistency with current clinical practices.

**Class II/III Restorative:** An exclusion regarding core buildups applied to onlays, 3/4 crowns, inlays and veneers was added.

**Group Requested Changes:** The Annual Plan Maximum has been increased to \$2,000 per person.

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### Plan Administration Changes

**Group Requested Changes:** Language regarding ‘Continuation of Benefits during Approved Leave’ in the **Employee Eligibility and Enrollment** section has been updated.

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### Text Revisions for Clarity and Accuracy – Benefits

#### **Benefit Booklet Revisions**

**Class I Preventive and Class II/III Periodontics:** Reference to periodontal case type has been removed and replaced with pocket depth measurement.

**Class I Preventative:** Language regarding limitations for space maintainers has been revised for consistency with industry standards.

**Class I Periodontics:** The Covered Dental Benefit ‘Antimicrobial rinse dispensed by the dental office’ has been replaced with ‘Prescription-strength antimicrobial rinses’ to accurately represent the covered benefit.

**Class II Sedation:** References to ‘Intravenous sedation’ have been replaced with ‘Intravenous moderate sedation’ to more accurately represent the covered benefit.

**Class III Periodontics:** The term ‘prosthetic appliance’ has been replaced with ‘removable partial denture’ to more accurately describe the covered benefit.

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### Text Revisions for Clarity and Accuracy – Plan Administration

#### **Contract Revisions**

**Terms & Conditions – Incentive Level 5.4.4:** Language regarding which services incentive levels apply to has been revised to refer to the declarations page.

**Terms & Conditions – Dependent Eligibility, Enrollment, and Termination 2.2.8:** Duplicative language regarding Dependent enrollment status in respect to the receipt of employee premiums has been removed.

#### **Benefit Booklet Revisions**

**Glossary:** A definition for Pocket Depth has been added.

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### Global General Text Revisions for Contract & Benefit Booklet

#### **Non-substantive Revision to Text**

Revisions have been made to correct typos, grammar and punctuation or to provide clarity throughout.