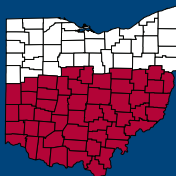




**SDC**  
*Superior Dental Care™*

LEADING THE WAY IN DENTAL BENEFITS

# 2012 SOCA SMALL GROUP PREFERRED PLANS



# SUPERIOR DENTAL CARE **SOCA 2012** OPEN ACCESS DENTAL CARE PLANS

## THE PREFERRED PLANS | Offered to sole proprietors and groups of 2-29 eligible employees

		Monthly Rates	
		2-Tier	3-Tier**
<b>Plan A</b>	100% Preventive 50% Basic 30% Major \$750 Contract Maximum <i>(per member, per contract period)</i> No Deductible	\$19.16 / Employee \$54.35 / Family	\$19.16 / Employee \$40.23 / EE+1 \$62.04 / Family
<b>Plan B</b>	100% Preventive 50% Basic 50% Major \$1,000 Contract Maximum <i>(per member, per contract period)</i> No Deductible	\$23.39 / Employee \$65.94 / Family	\$23.39 / Employee \$49.12 / EE+1 \$72.95 / Family
<b>Plan C</b>	100% Preventive 80% Basic 50% Major \$1,000 Contract Maximum <i>(per member, per contract period)</i> No Deductible	\$27.13 / Employee \$76.33 / Family	\$27.13 / Employee \$56.98 / EE+1 \$84.40 / Family

**Rates are guaranteed for twelve months when implemented by December 31, 2012**

**Employee** = employee only | **EE+1** = employee + 1 dependent (spouse/child) | **Family** = employee + 2 or more dependents

### UNDERWRITING GUIDELINES

Employer Contribution:	N/A
Participation Requirement:	Minimum of two enrolled employees; minimum of ten enrolled employees for orthodontia options SOCA Chamber Members: Sole Proprietors are eligible
Service Area Coverage:	Open Access, however, services by participating dentists are encouraged. (Please refer to SDC's Provider Directory)
SOCA Sole Proprietors:	Payment of three months of premiums is due in advance. Please refer to SDC's Master Group Contract upon signing with SDC for further payment details.
Group Eligibility:	Determined at the time of renewal

### ADDITIONAL RATING OPTIONS

- Add a Deductible\* of \$25/\$75: Base rates less 2%
- Add a Deductible\* of \$50/\$150: Base rates less 5%
- Reduce the Contract Max to \$750: Base rates less 5% (for plans B & C)
- Increase the Contract Max to \$1,000: Base rates plus 5% (for plan A)
- Add an Orthodontic Benefit of 50%/\$750 (*Minimum 10 enrolled employees*): Base rates plus 7.5% to the EE+1 and Family rates
- Add an Orthodontic Benefit of 50%/\$1,000 (*Minimum 10 enrolled employees*): Base rates plus 10% to the EE+1 and Family rates

\*Deductibles only apply to the Basic and Major categories and follow the contract period.

\*\*If choosing the 3-tier rates above, groups must have at least one employee enrolled in each of the tiers to be eligible for the 3-tier rates.

• **NO WAITING PERIODS** • **NO MISSING TOOTH CLAUSE** • **NO BALANCE BILLING (In Network)** • **NO CLAIM FORMS (In Network)**

## SOCA DENTAL CARE PLANS

SDC offers these specially rated plans to groups with as few as two enrolled employees. We also extend these same plans and rates to Sole Proprietors. SDC's Preferred Plan network consists of over 7,000 dental locations throughout Ohio and Kentucky and is the largest in the region. We encourage members to seek care from a participating dentist, which offers protection from balance billing.

SDC's goal is to provide the highest quality service in the marketplace while preserving the traditional dentist-patient relationship.

### Learn More About SDC

SDC's website, [www.superiordental.com](http://www.superiordental.com), offers helpful information for employers, dentists, members, brokers, and consultants. Our website includes a convenient Find-A-Dentist tool, dental health tips, and contact information. You'll also find our online account access system, Superior Direct Connect, which gives employers, members, and dentists access to their account to view claims, rosters, request important forms, and more. Superior Direct Connect is accessible directly from our homepage - just look for the red "Get Connected" button!

## BENEFIT CATEGORIES

**Preventive:** oral exams, x-rays, cleanings, fluoride treatments for children

**Basic:** fillings, root canal therapy, oral surgery, extractions, repairs & recementation

**Major:** crowns, onlays, bridges, dentures, sealants for children, periodontal gum treatment

Pre-determination of benefits is necessary if services are for \$400.00 or more and for periodontal services. Alternative benefits are based on the least expensive, professionally acceptable course of treatment. If the member and his/her dentist decide on a more expensive treatment, the additional cost will be the member's responsibility. All services are subject to the policies and procedures of SDC.

# ADDITIONAL BENEFITS

*SDC is pleased to offer two value-added benefits to enrolled members at no additional charge:*



## Access Plan D

The EyeMed Access Plan D is a discount plan providing reduced fees for exams, frames, lenses, and contact lenses. This program is offered to all SDC plan members. You and your family members will automatically receive discounts toward these services through LensCrafters, Sears, Target, JCPenney, Pearle Vision Centers, and Optique locations world-wide, and at participating providers. All discounts are provided at the point-of-service and the frequency is unlimited. See the chart below for discount levels. To find a participating provider near you, **please call toll-free 1-877-723-0513 or visit [www.eyemedvisioncare.com](http://www.eyemedvisioncare.com)**.

The EyeMed Access Plan D also provides a 15% savings off the retail price of Lasik and PRK procedures at all U.S. Laser Network Centers. **Members must first call 1-877-5LASER6 for the nearest facility and to receive authorization for the discount.**

Vision Care Services	Member Cost
<b>Exam with Dilation as Necessary</b>	\$5 off routine exam \$10 off contact lens exam
<b>Frames</b>	35% off retail price
<b>Standard Plastic Lenses</b>	
Single Vision	\$50
Bifocal	\$70
Trifocal	\$105
<b>Lens Options</b>	
Tint ( <i>Solid and Gradient</i> )	\$15
Standard Scratch Resistance	\$15
UV Coating	\$15
Standard Polycarbonate	\$40
Standard Anti Reflective Coating	\$45
Standard Progressive ( <i>add-on to Bifocal</i> )	\$65
Other Add-Ons and Services	20% off retail price
<b>Contact Lenses</b> ( <i>discount applies to materials only</i> )	
Conventional	15% off retail price
<b>LASIK or PRK Vision Correction</b>	15% off retail price or 5% off promotional pricing
<b>Frequency</b>	
Examination	Unlimited
Frames	Unlimited
Lenses or contact lenses	Unlimited

## ADDITIONAL BENEFITS *(continued)*

### SMILERIDER™ Cosmetic Discount Program

Superior Dental Care's **SMILERIDER™** is a supplemental cosmetic rider that is offered at no additional cost. The cosmetic rider provides a 15% discount for elective cosmetic services such as teeth whitening, veneers, bonding, and porcelain facings.

Ask any participating dentist for details. For a listing of dentists who provide these services in your area, please consult SDC's directory of dentists or visit our website at: **[www.superiordental.com](http://www.superiordental.com)**.



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