Healthy Smiles for Students

We make buying dental simple!
Ideal for students. Peace of mind for parents.

About “Our Student Dental Plan Options”

• Underwritten by Standard Life and Accident Insurance Company
• National network of dental providers
• Three dental plans to choose from
• In & Out of network benefits
• LOW co-payments
• DPO/DPO

No Paperwork!

Online Enrollment
Online Payment
Online Fulfillment

To search for a provider go to:
www.mwgidental.com

To purchase the Dental Plan go to http://Wesleyan.Dental-Enroll.com

Dental insurance policy underwritten by:

Standard Life
AND ACCIDENT INSURANCE COMPANY
League City, Texas
A MEMBER OF THE AMERICAN NATIONAL FAMILY OF COMPANIES

For Information about Benefits and Dependent Coverage please contact:

Smith Brothers Insurance
68 National Drive
Glastonbury, CT 06033
Katie Kruszewski
Phone: 680-430-3338
kkruszewski@smithbrothersusa.com
<table>
<thead>
<tr>
<th>Service Class</th>
<th>Waiting Period</th>
<th>Service Description</th>
<th>Year 1</th>
<th>Year 2</th>
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| Diagnostic & Preventive | No Wait | **Diagnostic** – Routine periodic examinations once in a 6 month period.  
**Preventive** – Dental prophylaxis (teeth cleaning) once in a 6 month period.  
**Radiography** – Bitewing and full mouth x-rays. | 100%   | 100%   |
| Basic         | 6 Months      | **Restorative** – Amalgam fillings.  
**Other** – Space maintainers, re-cementation of crowns. | 80%    | 80%    |
| Major         | 12 Months     | **Endodontics** – Pulpal therapy and root canals.  
**Periodontics** – Treatment of diseases of the gums.  
**Oral Surgery** – Extractions and other oral surgery, including pre and post-operative care.  
**Prosthetics** – Gold restorations, crowns, bridges, partials and complete dentures.  
**Other** – Pontics, repair of crowns and bridges, repair of full and partial dentures. | 0%     | 50%    |
| Copay         |               | $25 Per Person Per Visit                                                              |        |        |
| Plan Max      |               | $3,000 Per Person Per Calendar Year                                                  |        |        |
| Annual Premium|               | $754.20                                                                             |        |        |

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| Copay         |               | $25 Per Person Per Visit                                                              |        |        |
| Plan Max      |               | $1,500 Per Person Per Calendar Year                                                  |        |        |
| Annual Premium|               | $628.44                                                                             |        |        |

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| Copay         |               | $25 Per Person Per Visit                                                              |        |        |
| Plan Max      |               | $1,500 Per Person Per Calendar Year                                                  |        |        |
| Annual Premium|               | $387.12                                                                             |        |        |

One time Non Refundable Processing fee at enrollment of $35.00

2023 - 2024 Policy Year