

Healthy Smiles for Students



We make buying dental simple!

Ideal for students. Peace of mind for parents.

No Paperwork!

Online Enrollment ➔

Online Payment ➔

Online Fulfillment ➔

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

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

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



Dental insurance policy underwritten by:



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

RATE INFORMATION:

| High Option DPO/DPO Service Class | Waiting Period | Service Description | Year 1 | Year 2 |
|------------------------------------|----------------|--|--------|--------|
| Diagnostic & Preventive | No Wait | <i>Diagnostic</i> – Routine periodic examinations once in a 6 month period. <i>Preventive</i> – Dental prophylaxis (teeth cleaning) once in a 6 month period. <i>Radiography</i> – Bitewing and full mouth x-rays. | 100% | 100% |
| Basic | 6 Months | <i>Restorative</i> – Amalgam fillings. <i>Other</i> – Space maintainers, re-cementation of crowns. | 80% | 80% |
| Major | 12 Months | <i>Endodontics</i> – Pulpal therapy and root canals. <i>Periodontics</i> – Treatment of diseases of the gums. <i>Oral Surgery</i> – Extractions and other oral surgery, including pre and post-operative care. <i>Prosthetics</i> – Gold restorations, crowns, bridges, partials and complete dentures. <i>Other</i> – 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 | \$685.68 | | | |

| Medium Option DPO/DPO Service Class | Waiting Period | Service Description | Year 1 | Year 2 |
|-------------------------------------|----------------|--|--------|--------|
| Diagnostic & Preventive | No Wait | <i>Diagnostic</i> – Routine periodic examinations once in a 6 month period. <i>Preventive</i> – Dental prophylaxis (teeth cleaning) once in a 6 month period. <i>Radiography</i> – Bitewing and full mouth x-rays. | 100% | 100% |
| Basic | 6 Months | <i>Restorative</i> – Amalgam fillings. <i>Other</i> – Space maintainers, re-cementation of crowns. | 80% | 80% |
| Major | 12 Months | <i>Endodontics</i> – Pulpal therapy and root canals. <i>Periodontics</i> – Treatment of diseases of the gums. <i>Oral Surgery</i> – Extractions and other oral surgery, including pre and post-operative care. <i>Prosthetics</i> – Gold restorations, crowns, bridges, partials and complete dentures. <i>Other</i> – Pontics, repair of crowns and bridges, repair of full and partial dentures. | 0% | 50% |
| Copay | \$25 | Per Person Per Visit | | |
| Plan Max | \$1,500 | Per Person Per Calendar Year | | |
| Annual Premium | \$571.32 | | | |

| Low Option DPO/DPO Service Class | Waiting Period | Service Description | Year 1 | Year 2 |
|------------------------------------|----------------|--|--------|--------|
| Diagnostic & Preventive | No Wait | <i>Diagnostic</i> – Routine periodic examinations once in a 6 month period. <i>Preventive</i> – Dental prophylaxis (teeth cleaning) once in a 6 month period. <i>Radiography</i> – Bitewing and full mouth x-rays. | 100% | 100% |
| Basic | 6 Months | <i>Restorative</i> – Amalgam fillings. <i>Other</i> – Space maintainers, re-cementation of crowns. | 80% | 80% |
| Copay | \$25 | Per Person Per Visit | | |
| Plan Max | \$1,500 | Per Person Per Calendar Year | | |
| Annual Premium | \$351.96 | | | |

One time Non Refundable Processing fee at enrollment of \$35.00