

What should I do when I go to the dentist?

At your visit, you'll simply provide a copy of your ID card to the dentist's office and pay the deductible (*deductible waived for preventative care*). The dentist will submit the claim to Guardian, and then mail a bill directly to your home if any residual payment that may be due. Guardian will also mail the Explanation of Benefits (EOB) statement to your home to show the claim breakdown.

How much is my deductible?

The annual deductible is \$25 per person with a 3 person family maximum of \$75. This means that if you have 5 family members, your maximum deductible will only be \$75 per calendar year.

When do I pay my deductible?

The annual deductible is only applied to Basic, Major, and Orthodontic services. Preventative services do not require a deductible, meaning if your visit is for a routine cleaning, you pay no deductible.

How much of my services are covered?

The annual limit on all dental services has been increased to \$2,000 per person, per calendar year. The plan also covers a lifetime maximum of \$2,000 in orthodontia, which is separate from your limit for basic, preventative and major care services.

Benefit Type	Examples	Co-Insurance
Preventative	Evaluations, cleanings, x-rays, fluoride treatments, and sealants	Covered at 100% (<i>deductible waived</i>)
Basic	Fillings, root canals, deep cleaning, crown repair, extraction, anesthesia, mouth guards, and denture repair	Covered at 80% (<i>deductible applies</i>)
Major	Inlays, on lays, crowns, implants, full and partial dentures	Covered at 80% (<i>deductible applies</i>)
Orthodontics	Braces and retainers	Covered at 80% (<i>deductible applies</i>)

Do I have to choose a Guardian preferred dentist?

No, you may visit any dentist of your choice and Guardian will process the claim at the rates submitted. If you do not visit a Guardian preferred dentist, you may reach your \$2,000 annual maximum sooner because higher benefit payments are being issued. Whether you use an in network or out of network provider your out-of-pocket costs are no higher than they were when on the Fisher Investments dental and vision plan (*excluding any amounts over \$2,000*).

What are the advantages of choosing a Guardian preferred dentist?

Choosing a provider from the Guardian network allows you to take advantage of in-network discounts for your services. Lower costs mean less money is applied to your annual limit and less in co-payments

for you. Please see below for an example of costs on a Guardian preferred provider vs. a non-Guardian network provider.

**Out-of-pocket examples are based on the first claim submitted for the year.*

Guardian Preferred Service	Average Cost (in-network disc)	Service Type	Amt. Applied to Annual Max	Your Deductible Cost (1 st service)	Out-of- Pocket Cost
Cleaning	\$75	Preventative	\$75	\$0	\$0
Composite filling	\$110	Basic	\$88	\$25	\$22
Crown	\$915	Major	\$732	\$25	\$183
Root canal	\$870	Basic	\$696	\$25	\$174

Non-Guardian Preferred	Average Cost (no disc)	Service Type	Amt. Applied to Annual Max	Your Deductible Cost (1 st service)	Out-of- Pocket Cost
Cleaning	\$120	Preventative	\$120	\$0	\$0
Composite filling	\$180	Basic	\$144	\$25	\$61
Crown	\$1,200	Major	\$960	\$25	\$265
Root canal	\$1,250	Basic	\$1,000	\$25	\$275

Will my Non-Guardian Preferred dentist still submit my claim to Guardian?

In most cases, Non-Guardian Preferred dentists will still submit the claim on your behalf. In the event that your dentist will not submit the claim to Guardian, you will need to complete a claim form and send it to Guardian for the services. Guardian can pay the dentist or send the reimbursement directly to you. The claim form can be found on the Benefits page of FIIRE and on the Benefits website www.myfibenefits.com. For assistance with filing a claim, contact Member Services at (800) 541-7846, available Monday through Friday from 5:00am until 5:30pm or the Benefits team line at (650) 350-5886.

What should I do if I've already paid a claim directly to my dentist?

The easiest way to get a claim processed would be to ask your dentist to submit on your behalf and then issue a refund for the amount paid. You can also submit a claim directly to Guardian to have the reimbursement paid directly to you. Please see instructions under the above Q & A on how to submit a claim.

What are my limitations on the covered services?

Unlike traditional dental plans that limit your cleanings, x-rays, and fluoride treatments to twice a year, limit orthodontics, and don't permit implant coverage; our plan was designed for flexibility! We have opened it up so that you don't have to spend your time scouring a plan document for coverage details. The only services not covered are cosmetic dentistry (teeth whitening, veneers, etc.) and dental supplies (tooth brushes, tooth paste, mouthwash, etc.), and TMJ claims.

**Claims will be reviewed for medical appropriateness.*

Where can I view my remaining balance and claims processed?

You can review your benefits, look up coverage amounts, check the status of a claim, find a provider, and view your remaining annual balance online at www.GuardianAnytime.com. It only takes two minutes to register and get online, 24/7 access to your information.

How do I search for a provider?

- Go to www.GuardianAnytime.com and click on the words **'Find a Provider'**
- Click on **'Find a Dentist'**
- From the 'Select Your Dental Plan' option, choose **'PPO'**
- Choose a Search by option and enter your criteria
- From the 'Select Your Dental Network' option, choose **'Dental Guard Preferred'**
- Click **'Continue'** to get your results

Would you prefer to search for a provider on your smartphone? No problem – Guardian's got an app for that. Go to www.GuardianAnytime.com and click on the cell phone link "Download our app to Find a Provider". Submit your email address and you will receive an email notification with a link to the app. Open the email and link from your smartphone.