



Dental Benefit Summary

# New Life Construction

**Plan:** SmartPremium Plus

**Policy effective date:** 02/01/2024    **Group #:** CA03948

**Policy length:** 12 months

## Plan Coverage

**In-network**  
(PPO fee)

**Out-of-network**  
(90th percentile UCR)

### Preventive & Diagnostic

**Diagnostic and preventive:** exams, cleanings, fluoride, space maintainers, x-rays, and sealants

100%

100%

### Basic

**Emergency palliative treatment:** to temporarily relieve pain

**Endodontics:** root canals

**Minor restorative:** fillings

**Oral surgery:** extractions and dental surgery

**Periodontics:** to treat gum disease

**Prosthetic maintenance:** relines and repairs to bridges and dentures

80%

80%

### Major

**Implants:** endosteal in lieu of a 2 or 3 unit bridge

**Major restorative:** crowns, inlays, and onlays

**Prosthetics:** bridges

**Prosthodontics:** dentures

50%

50%

## Plan maxes

Annual maximum applies to diagnostic & preventive, basic services, and major services. Lifetime maximum applies to orthodontic services.

**Annual max based on calendar year.**

### Annual max

**Benefit period:** calendar year

\$1,500 /yr

### Ortho Lifetime Max

\$0 /lifetime



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## Plan deductible

The deductible is waived for diagnostic & preventive services.

**Individual**

**\$50.00** /yr

**Family**

**\$150.00** /yr

## Claims Information

**Beam Insurance Administrators**  
PO Box 75372  
Cincinnati, OH 45275

**Electronic payer ID**  
BEAM1

**NEA ID**  
BEAM1

**Fax number**  
(844) 688-4821

**Phone number**  
(800) 648-1179

**Claim form accepted**  
ADA form 2006 or later

Beam Dental PPO Standard coverages, as of August 1, 2019

### Questions?

If you have questions, call us at (800) 648-1179. We'd love to help! Or visit [app.beambenefits.com](https://app.beambenefits.com) and login to view more info. Please check your Certificate of Insurance for a description of coverage, limitations, and exclusions under the plan. Some services require prior authorization.

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This benefit summary is not a complete description of the insurance coverage. Controlling provisions are provided in the policy, and this summary does not modify those provisions or the insurance in any way. This is not a binding contract. A certificate of coverage will be made available to you that describes the benefits in greater details. Should there be a difference between this summary and the contract, the contract will govern.

Dental insurance product underwritten by National Guardian Life Insurance Company (NGL), Madison, WI, marketed by Beam Insurance Services LLC (Beam Benefits Insurance Services LLC, in CA). Dental policy form number NDNGRP 2020. Dental product underwritten by Nationwide Life Insurance Company, Columbus, OH in NY, DE, ID, LA, UT, OH, TX and NM. Dental coverage applicable to policy form GDTL AO L20, or state equivalent. Dental product administered by Beam Insurance Administrators LLC (Beam Dental Insurance Administrators LLC, in Texas). Not all Products Available in All States.

Two life groups made up of only a husband-wife, domestic partners or same-sex couple are not eligible for coverage.

National Guardian Life Insurance Company, Madison, WI, is not affiliated with The Guardian Life Insurance Company of America, a.k.a. The Guardian, or Guardian Life.

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National Guardian Life Insurance Company, Two East Gilman, Madison, Wisconsin 53703

Nationwide Life Insurance Company, One Nationwide Plaza, Columbus, OH 43215



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