

MAC Dental Plans

A Viable and Affordable Option!

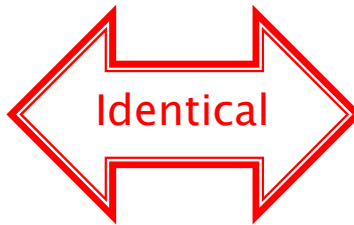


Best Dental Plan or Bust?

Not every group needs to have a UCR plan

UCR Plan

- \$50 Deductible
- 100/80/50 Plan
- In & Out of network
- \$1000 Maximum
- PPO National Network



MAC Plan

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The Difference?

- Out of network claims paid on a Usual & Customary (UCR) basis

- Out of Network Claims based on in network Fee Schedule

“How big is the network?”

When you pay for a UCR plan and use in-network dentists, the client is wasting premium.



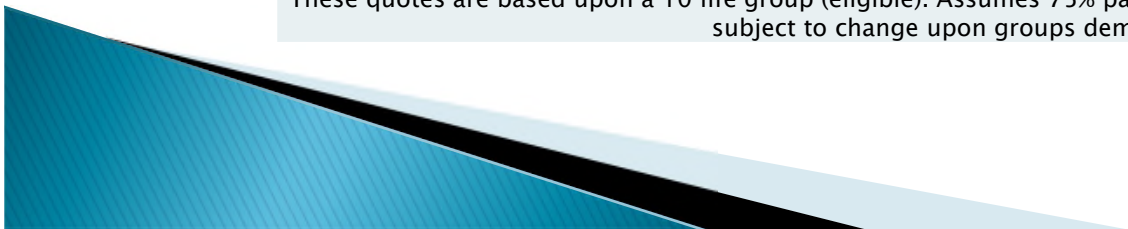
Everyone Benefits

CLIENT	BROKER
<ul style="list-style-type: none">• Dental is the 3rd most requested benefit• Employees utilize this benefit• Creates a full benefit portfolio for your employees	<ul style="list-style-type: none">• Increases Medical Retention<ul style="list-style-type: none">– 1 Line = 85%– 2 Lines=87%– 3 Lines=90%• Keeps competitors out• Increase Commissions• You are a full benefit advisor, not just a medical advisor



NY MAC Options– Sample

Dental Options	Option 1	Option 2	Option 3	Option 4	Option 5
	Ameritas	Delta	OBM	UHC	Guardian
	All Employees	All Employees	All Employees	All Employees	All Employees
Type of Plan	PPO	PPO	PPO	PPO	PPO
Annual Maximum	\$1,500	\$2000/\$1500	\$1,500	\$1,000	\$1,500
Out of network Reimbursement	MAC	MAC	MAC	MAC	MAC
Coinsurance (how much the carrier covers)					
Preventative/Diagnostic	100%	100%	100%	100%	100%
Basic	90%/80%	80%	80%	80%	80%
Major	60%/50%	50%	50%	50%	50%
Deductible (single/family)	\$50/\$150	\$50/\$150	\$50/\$150	\$50/\$150	\$50/\$150
Waiting Periods for Major	NO	Yes– 6 months	NO	NO	NO
Rates per month:					
Employee	\$39.96	\$50.55	\$37.81	\$30.13	\$44.86
Employee & Spouse	\$80.28	\$107.66	\$64.17	\$60.26	\$91.06
Employee & Children	\$94.93	\$149.93	\$66.67	\$60.81	\$101.78
Employee & Family	\$135.42	\$149.93	\$95.68	\$93.73	\$156.73
These quotes are based upon a 10 life group (eligible). Assumes 75% participation. This is for reference only. Rates are subject to change upon groups demographics.					



NJ MAC Options– Sample

Dental Options	Option 1	Option 2	Option 3	Option 4	Option 5
	Ameritas	Delta	UHC	OBM	Guardian
	All Employees	All Employees	All Employees	All Employees	All Employees
Type of Plan	PPO	PPO	PPO	PPO	PPO
Annual Maximum	\$1,500	\$2000/\$1500	\$1,500	\$1,500	\$1,500
Out of network Reimbursement	80th UCR	MAC	MAC	MAC	MAC
Coinsurance (how much the carrier covers)					
Preventative/Diagnostic	100%	100%	100%	100%	100%
Basic	90%/80%	80%	80%	80%	80%
Major	60%/50%	50%	50%	50%	50%
Deductible (single/family)	\$50/\$150	\$50/\$150	\$50/\$150	\$50/\$150	\$50/\$150
Waiting Periods for Major	NO	Yes– 6 months	NO	NO	NO
Rates per month:					
Employee	\$39.52	\$46.84	\$36.52	\$43.34	\$43.38
Employee & Spouse	\$79.70	\$89.92	\$73.04	\$75.18	\$88.05
Employee & Children	\$92.38	\$152.79	\$73.71	\$78.19	\$98.78
Employee & Family	\$132.60	\$152.79	\$113.61	\$113.23	\$151.96
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