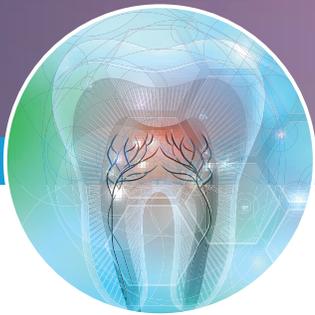


DENTAL PLANS THAT GIVE EVERYONE A REASON TO SMILE.



Our simplified, high-quality dental plans are designed to fit the needs of a small business.



> PLAN FEATURES*

- Preventive and diagnostic covered at 100%
- No waiting periods
- Child ortho care plan pickup option
- No missing tooth clause
- No downgrades on composites
- Additional cleanings for pregnant women and diabetics
- Mouthguards for bruxism

* Please see plan documents for services that are considered Preventive and Diagnostic. Coverage is provided by third party insurers. Policy limitations and exclusions apply.



DENTAL PLAN OPTIONS

PLAN OPTIONS	SmartPremium 100/80/50/50- 1000-1000	SmartPremium Plus 100/80/50/50- 1000-1000	SmartPremium Select 100/90/60/50-2000-2000 (100/80/50/50 OON)	SmartPremium Ultra 100/100/60/50-5000-2500 (100/80/50/50 OON)
Annual Max + Deductible	\$1,000 + \$50	\$1,000 + \$50	\$2,000 + \$50	\$5,000 + \$25
Endo/Perio/Oral Surgery	Major	Basic	Basic	Basic
Preventive & Diagnostic Covered At	100%	100%	100%	100%
Basic Covered At	80%	80%	90% (80% OON)	100% (80% OON)
Major Covered At	50%	50%	60% (50% OON)	60% (50% OON)
Ortho Covered At	50%	50%	50%	50%
Standard OON Reimbursement	90th UCR	90th UCR	90th UCR	90th UCR
Ortho Lifetime Max	\$1,000	\$1,000	\$2,000	\$2,500
Annual Max Carryover Benefit	Yes	Yes	Yes	Yes
Night Guards (teeth grinding)	Yes	Yes	Yes	Yes
Missing Tooth Waiting Period	None	None	None	None

Coverage is provided by third party insurers. Policy limitations and exclusions apply.

THE BEAM DIFFERENCE

Beam Perks and smart brush – Perks¹ program provides a smart toothbrush that rewards² groups and members for consistent brushing habits.

Beam network – Broad network of dentists across the country. Use the [Find a Dentist Tool](#) to find an in-network provider and save on out-of-pocket costs.

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¹ Beam Perks™ is provided by Beam Perks LLC. Eligible members age four (4) and up at the time of enrollment are eligible to receive Beam Perks™ and must select their Beam Brush color within 45 days of enrollment to participate. If you do not have a mobile device you can obtain Beam Perks™ by contacting Customer Operations at 800-648-1179. Beam Perks™ can be obtained separately without the purchase of an insurance product by visiting [perks.beam.dental](https://www.beambenefits.com/legal/beam-perks-terms-and-conditions). Beam Perks™ may be changed at any time without notice and is subject to availability. See <https://www.beambenefits.com/legal/beam-perks-terms-and-conditions> for Terms and Conditions.

² Beam Perks™ is a voluntary program. The information provided under this program is for general informational purposes only and is not intended to be nor should be construed as medical advice. You should consult with an appropriate health care professional to determine what may be right for you. Rewards may be taxable. You should consult with an appropriate tax professional to determine if you have any tax obligations from receiving rewards under this program. If any fraudulent activity is detected (e.g., misrepresented brushing activity), you may be suspended and/or terminated from the program. If you are unable to meet a standard related to a health factor to receive a reward under this program, you might qualify for an opportunity to receive the reward by different means. Contact us at 800-648-1179 and we will work with you (and, if necessary, your doctor) to find another way for you to earn the same reward. Availability and rewards may be limited due to incentive limits under applicable law. See <https://www.beambenefits.com/legal/beam-perks-terms-and-conditions> for full program Terms and Conditions.

VISION PLANS
THAT LOOK GOOD
ON ANYONE.



Together with Beam Benefits, we offer extended vision coverage beyond the basics with self-service tools and helpful support.

beam®

PLAN FEATURES

- › Exams and lenses covered every 12 months
- › Frames covered every 12 or 24 months
- › Two-year vision rate guarantee
- › 41,000+ providers and 115,000 access points¹
- › Low copays
- › 20% savings on the amount over allowance²
- › Up to \$200 in frame allowances
- › Up to \$200 in elective contact allowances

Coverage is provided by third party insurers.
Policy limitations and exclusions apply.



VISION PLAN OPTIONS

PLAN OPTIONS	Plan 1	Plan 2	Plan 3	Plan 4	Plan 5	Plan 6
Exam Frequency	12 months	12 months	12 months	12 months	12 months	12 months
Lens Frequency	12 months	12 months	12 months	12 months	12 months	12 months
Frames Frequency	24 months	12 months	12 months	12 months	24 months	12 months
Contacts (Instead of Glasses)	12 months	12 months	12 months	12 months	12 months	12 months
Exam Copay	\$10	\$10	\$10	\$10	\$10	\$10
Material Copay	\$25	\$10	\$10	\$10	\$25	\$25
Contact Lens Fitting & Evaluation	15% discount up to \$60	15% discount up to \$60	15% discount up to \$60			
Contact/Frame Allowance	\$150 or 20% off overage	\$150 or 20% off overage	\$200 or 20% off overage	\$175 or 20% off overage	\$130 or 20% off overage	\$130 or 20% off overage
Elective Contact Lenses	\$150	\$150	\$200	\$175	\$130	\$130
Covered Lens Options	Low vision & polycarbonate for children	Low vision & polycarbonate for children	Low vision & polycarbonate for children	AR coating, Scratch coating, Low vision & polycarbonate for children	Low vision & polycarbonate for children	Low vision & polycarbonate for children

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¹ Access points and providers based on data provided by VSP for the VSP Choice Network as of February 2023.

² 20% discount is an additional benefit offered by VSP and not included in the insurance benefit plan.