

# PRIMESTAR<sup>SM</sup>

## Product Overview



Security Life's PrimeStar Dental insurance plans offer individuals a distinctive portfolio of flexible benefit plan designs with affordability to meet just about every need. Whether an individual is looking for a plan with basic coverage, orthodontia for their dependent(s) or a plan with comprehensive coverage – PrimeStar has a solution.

To learn more about PrimeStar or to get your client a free online quote, visit [SecurityLife.com/personal-plans](https://www.SecurityLife.com/personal-plans)



### PrimeStar Essential

Designed for someone looking for basic coverage at an affordable cost.

- ✓ 100% coverage day one on Preventive services
- ✓ Freedom to use any dentist or utilize a MaxCare network provider for the greatest savings
- ✓ \$500 Maximum Benefit Amount
- ✓ Coverage available for all ages
- ✓ Optional vision coverage available<sup>†</sup>

Services	Policy Pays	Deductible	Waiting Period
<b>PREVENTIVE</b> Exams, cleanings (2/year), fluoride treatments (under age 16)	100%	Lifetime \$50	None
<b>BASIC</b> Fillings, x-rays, simple extractions and sealants (under age 16)	80%	Calendar Year \$50	6 months
<b>MAJOR</b> None	None	None	None

Calendar year deductible for Basic has a maximum of 3 per family each year.

### PrimeStar Advantage

Designed for someone looking for coverage in all services with no waiting periods.

- ✓ Coverage available day one in all services
- ✓ Freedom to use any dentist or utilize a MaxCare network provider for the greatest savings
- ✓ Option of \$1,000 or \$2,000 Maximum Benefit Amount\*
- ✓ Coverage available for all ages
- ✓ Optional vision coverage available<sup>†</sup>

Services	Policy Pays	Deductible
<b>PREVENTIVE</b> Exams, cleanings (2/year), fluoride treatments and sealants (under age 16)	100%	Lifetime \$50
<b>BASIC</b> Fillings, x-rays and simple extractions	35% / 50% / 65%	Calendar Year \$50
<b>MAJOR</b> Oral surgery, endodontics, periodontics, crowns, bridges and dentures	10% / 25% / 50%	Calendar Year \$50

Basic and major calendar year deductible is combined per person, with a maximum of 3 deductibles per family.

## PrimeStar Advantage Plus

Designed for someone looking for coverage in all services – including orthodontics.

- ✓ Orthodontic coverage available
- ✓ Coverage available day one in all services, except orthodontic
- ✓ Freedom to use any dentist or utilize a MaxCare network provider for the greatest savings
- ✓ Option of \$1,000 or \$2,000 Maximum Benefit Amount\*
- ✓ Coverage available for all ages
- ✓ Option vision coverage available†

Services	Policy Pays	Deductible
<b>PREVENTIVE</b> Exams, cleanings (2/year), fluoride treatments and sealants (under age 16)	100%	Lifetime \$50
<b>BASIC</b> Fillings, x-rays and simple extractions	35% / 65% / 80%	Calendar Year \$50
<b>MAJOR</b> Oral surgery, endodontics, periodontics, crowns, bridges and dentures	15% / 50% / 50%	Calendar Year \$50
<b>ORTHODONTIC</b> Under age 19 Lifetime Maximum: \$1,000 per child	0% / 0% / 50%	Calendar Year \$50/child

Basic and major calendar year deductible is combined per person, with a maximum of 3 deductibles per family.

## PrimeStar Complete

Designed for someone looking for comprehensive coverage on all levels of services – including Major.

- ✓ 100% coverage day one on Preventive services
- ✓ Freedom to use any dentist or utilize a MaxCare network provider for the greatest savings
- ✓ Option of \$1,000 or \$2,000 Maximum Benefit Amount\*
- ✓ Coverage available for all ages
- ✓ Option vision coverage available†

Services	Policy Pays	Deductible	Waiting Period
<b>PREVENTIVE</b> Exams, cleanings (2/year), fluoride treatments and sealants (under age 16)	100%	Lifetime \$0	None
<b>BASIC</b> Fillings, x-rays and oral surgery	80%	Calendar Year \$50	6 months
<b>MAJOR</b> Endodontics, periodontics, crowns, bridges and dentures	50%	Calendar Year \$50	15 months

Basic and major calendar year deductible is combined per person, with a maximum of 3 deductibles per family.

For agent use only - not to be used in a sales situation.

\*A higher maximum benefit will increase the premium.

†Vision coverage available at an additional cost.

PrimeStar (Individual Dental Policy Form IP1000 (and any state specifics) and Vision Rider IPR1001 (and any state specifics), or One Life Group Dental Policy GH-1112 (and any state specific) and vision rider GHR-1112 (vision) (and any state specific)) have exclusions, limitations and terms under which the policy may be continued in force or discontinued.

For costs and complete details of coverage, see the Certificate of Insurance or call us at 855.728.8542.

Products not available in all states and subject to individual state regulations.

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