

ManhattanLife
Standing By You. Since 1850.™

Dental, Vision and Hearing Insurance

A plan with choices for you and your family

The Importance of Dental | Vision | Hearing

- Quality of Life
- Unforeseen situations that are painful, inconvenient and expensive
- Basic Medicare does not cover dental, vision or hearing expenses

PRODUCTS HIGHLIGHTS

- Choose your dentist - *In network or out of network*
- Family Rates (includes a maximum of 3 children)
- Individual 18 - 85
- $1,000 - $5,000 policy year benefit option available
- Guaranteed Issue
- Guaranteed renewable for life*

** Subject to our right to change premiums.*

NEW! Careington Network

Clients can now access the Careington Maximum Care PPO Dental Network. Use of network completely optional.

- Policyholders can now use, if they choose, a dental provider from the Careington Dental network.
- Policyholders can also use the dentist of their choice, even if not part of the dental network.
- Network discounts may help extend the policy year maximum with reduced charges.
- Careington can be contacted at (800) 290-0523.

Careington
SOLUTIONS SIMPLIFIED

DVH7016-BR 0823

Protect Your Smile and Smile Brighter!

Protect Your Sight and See Clearer!

Protect Your Hearing and Hear Better!

This is a Limited Benefit Insurance Policy for Dental, Vision and Hearing Expenses

Underwritten by ManhattanLife Insurance and Annuity Company

Not available in all states

PLAN BENEFITS [1]	
Eligibility	Anyone age 18 - 85
Policy Year Maximum Benefit	**$1,000, $1,500, $3,000 o $5,000** (choose one)
Policy Year Deductible	$100 per person
Dental Coverage	
Preventive Services Semi-Annual exams, cleaning and x-rays	**Year 1 - 60% Year 2 - 70% Year 3 and thereafter - 80%**
Waiting Period	**None**
Basic Services Including x-ray, fillings and extractions (other than "full mouth")	**Year 1 - 60% Year 2 - 70% Year 3 and thereafter - 80%**
Waiting Period	**None**
Major Services Including bridges, crowns, full dentures or partials, full mouth extractions, and root canals	**Year 1 - 0% Year 2 - 70% Year 3 and thereafter - 80%**
Waiting Period	**12 months**
Vision Coverage	
Basic eye exam, eye refraction, including the cost of eye glasses or contact lenses	**Year 1 - 60% Year 2 - 70% Year 3 and thereafter - 80%**
Waiting Period	**6 months** on eyeglasses and contact lenses
Hearing Coverage	
Exam, hearing aid and necessary repairs or supplies	**Year 1 - 60% Year 2 - 70% Year 3 and thereafter - 80%**
Waiting Period	**12 months** new hearing aids and existing hearing aid repairs

[1] Refer to your policy for a complete description of limitations and exclusions.

INDIVIDUAL MONTHLY PREMIUM				
Age	**$1,000**	**$1,500**	**$3,000**	**$5,000**
18 - 39	$30.24	$39.98	$48.15	$60.64
40 - 54	$32.74	$42.40	$52.23	$65.56
55 - 64	$35.07	$45.98	$59.56	$73.72
65 - 74	$37.57	$49.65	$64.39	$78.97
75 - 85	$43.15	$57.06	$74.05	$88.63

FAMILY MONTHLY PREMIUM *				
Age	**$1,000**	**$1,500**	**$3,000**	**$5,000**
18 - 39	$96.79	$127.70	$154.19	$199.09
40 - 54	$101.63	$132.61	$159.85	$208.92
55 - 64	$106.54	$139.86	$172.60	$225.24
65 - 74	$111.37	$147.11	$190.59	$235.74
75 - 85	$128.03	$169.18	$219.50	$255.06

CHILD MONTHLY PREMIUM *				
Age	**$1,000**	**$1,500**	**$3,000**	**$5,000**
3 - 17	$22.74	$29.99	$36.15	$48.65

** Family rates include up to three children. Additional children are charged the age 3 - 17 rate per person.*

** Individual and (1) child will be charged an individual + child rate.*

Premiums are subject to change. Premium rates based on $1,000, $1,500, $3,000 or $5,000 Policy Year Maximum. Use the age of the oldest applicant. Benefit exclusions and limitations apply.

Policy Form Numbers: AK7016, AK7016-ID, AK7016-LA, AK7016-MT, AK7016-OK, AK7016-TX (including state variations)

Underwritten by: ManhattanLife Insurance and Annuity Company
10777 Northwest Freeway, Houston, TX 77092 Toll Free Telephone: 800-669-9030

This is not a complete disclosure of plan qualifications and limitations. Please access our website to obtain a completed list for the Dental, Vision and Hearing product at **disclosure.manhattanlife.com**. Please review this information before applying for coverage. The amounts of benefits provided depend on the plan selected. Premiums will vary according to the selection made.