



Monthly Rates <i>Includes \$1.67 monthly policy fee</i>			
Issue Age	Benefit Level		
	\$1,000	\$2,000	\$3,000
18-39	\$20.80	\$21.63	\$25.60
40-44	\$23.18	\$28.14	\$30.14
45-49	\$24.79	\$30.43	\$32.77
50-54	\$27.17	\$33.45	\$36.58
55-59	\$29.55	\$37.66	\$40.66
60-65	\$32.31	\$41.51	\$45.19
66-69	\$35.07	\$44.53	\$50.17
70-74	\$36.69	\$46.82	\$52.80
75-79	\$36.69	\$48.38	\$53.17
80-84	\$37.07	\$48.74	\$53.53
85-89	\$37.45	\$49.11	\$53.89
Child Rider	\$23.03	\$25.64	\$25.84

Annual Rates <i>Includes \$20 annual policy fee</i>			
Issue Age	Benefit Level		
	\$1,000	\$2,000	\$3,000
18-39	\$249.54	\$259.58	\$307.23
40-44	\$278.09	\$337.61	\$361.63
45-49	\$297.51	\$365.09	\$393.18
50-54	\$326.06	\$401.35	\$438.88
55-59	\$354.61	\$451.91	\$487.84
60-65	\$387.72	\$498.07	\$542.24
66-69	\$420.84	\$534.33	\$602.08
70-74	\$440.26	\$561.81	\$633.63
75-79	\$440.26	\$580.49	\$637.98
80-84	\$444.82	\$584.89	\$642.34
85-89	\$449.39	\$589.28	\$646.69
Child Rider	\$276.36	\$307.72	\$310.08

### Premium Mode Factors:

Monthly PAC 0.08333

Quarterly 0.25

Semi Annual 0.5

Dental Shield Benefit Policy U21DN

Child Rider RU21DCR



## HOW IT WORKS

### 1 THE BASICS:

UNL will pay **80% of ACTUAL CHARGES** for covered expenses up to the calendar year maximum benefit after a once annual \$100 deductible is met.

### 2 BENEFIT OPTIONS:

- **\$1,000** Benefit Plan
- **\$2,000** Benefit Plan
- **\$3,000** Benefit Plan

### 3 NO NETWORKS:

Go to any dentist you choose while having the peace of mind knowing that benefits are paid directly to you, or whomever you choose.

- **No waiting period for preventative care.**
- **No inside limits for any services.**



## WAITING PERIODS

After the policy has been in force for...

### NO WAITING PERIOD

Preventative x-rays, two dental cleanings per calendar year (up to \$100 each).

### 6 MONTHS

Most basic dental care:

- Restorations (Fillings)
- X-rays—Limited or Problem-Focused
- Nonsurgical Tooth Extraction
- Palliative Care

### 12 MONTHS

Almost all non-cosmetic dental care is covered, including but not limited to: bridges, crowns, dentures\*, root canals, out-patient dental surgery, "full mouth" extractions, etc.

**\*If replacement or repair of existing bridges or dentures is needed as the result of injury, the 12 month waiting period is waived.**