

The Guardian PPO insurance policy provides dental coverage with specific benefits for both in-network and out-of-network services. For deductibles, individuals pay \$75 in-network and \$150 out-of-network, while families pay \$225 and \$450, respectively. The out-of-pocket maximum for members under 19 is \$350 for one child and \$700 for two or more children, after which Guardian covers 100% of dental charges for the remainder of the year. For members 19 and older, the annual maximum reimbursement for services is \$1,000. Preventive services, including oral exams, cleanings, and x-rays, are covered at 100% after the deductible is met, while basic and major services are covered at 50% after a waiting period of six and twelve months, respectively. Medically necessary orthodontia is also covered at 50% for members under 19. The policy allows members to see any dentist, but greater savings are available through Guardian's DentalGuard Preferred network, where charges are reimbursed directly. The plan includes pediatric dental Essential Health Benefits as mandated by the Affordable Care Act.

Exclusions and limitations apply primarily to members 19 and older, including no coverage for teeth lost or extracted before coverage began, cosmetic services, experimental treatments, and services related to felony participation or military service. Additionally, the policy does not cover medical services, services provided in government facilities, or those covered by Medicare or other governmental programs. Other exclusions include services not listed in the policy, separately billed services by hospital employees, and those with no charge. Coverage is also not provided for services related to workers' compensation. The policy emphasizes that the plan documents are the final authority on coverage details.