Vantage Point Benefits

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Vantage Point

DENTAL AND VISION PLANS

Individuals Families Self Employed



LIMITATIONS AND EXCLUSIONS: The information contained herein is intended as an easy-to-read summary. Additional limitations and exclusions may apply to covered services. In the event of inconsistencies with insurers certificate, the certificate will control. This is not a contract and is not intended to serve as required legal notification. ©VANTAGE POINT INC.







What matters most to you about Dental Insurance?

Freedom to Choose

Vantage Choice gives you the freedom to choose any dentist. The plan covers preventive and Basic care immediately. Discounts while in waiting period for major services.

Immediate Care

Vantage Care provides you with immediate access to all plan benefits. There are no waiting periods, deductibles or maximums.

Low Monthly Cost

Vantage Point offers unique plan designs and are among the most affordable options available in the market today.

Your Dental Health

Emphasis On Preventive Care.

Individuals with dental plans are more likely to seek regular dental care that can help prevent future costly and painful treatment. Vantage Point Benefits' mission is to provide dental plans that emphasize preventive and diagnostic care. Good dental health is essential to your overall well-being, and you now have access to quality care at a price you can afford. These three plans have been designed to help you maintain optimal dental health.

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Opticare Plan: 15-100C

 Monthly
 Annually x 12

 Single
 \$10.82
 Single
 \$ 9.73
 \$116.76

 Two Party
 \$21.01
 Two Party
 \$18.95
 \$227.40

 Family
 \$26.94
 Family
 \$24.25
 \$291.00

VANTAGE POINT	Select Network	Broad Network	Out-of- Network
Eve Exam			
Eyeglass exam Contact exam Dilation Contact Fitting	\$15 Co-pay \$15 Co-pay 100% Covered 100% Covered	\$25 Co-pay \$25 Co-pay Retail Retail	◆\$35 Allowance ◆\$35 Allowance Included above Included above
Lenses			
Single Vision Bifocal (FT 28) Trifocal (FT 7x28)	100% Covered 100% Covered 100% Covered	\$10 Co-pay \$10 Co-pay \$10 Co-pay	\$\$5 Allowance for lenses, options, and coatings.
Lens Options			
*Progressive (Standard no-line) *Premium Progressive Options Glass Lenses Polycarbonate High Index	\$30 Co-pay 20% Discount 15% Discount \$40 Co-pay \$80 Co-pay	\$50 Co-pay No Discount 15% Discount 25% Discount 25% Discount	
Coatings			
Scratch Resistant Coating Ultra Violet protection Other Options A/R, edge polish, tints, mirrors, etc.	100% Covered 100% Covered Up to 25% Discount	\$10 Co-pay \$10 Co-pay Up to 25% Discount	
Frames			
Allowance Based on Retail Pricing	\$100 Allowance	\$80 Allowance	♦\$60 Allowance
**Additional Pairs of Glasses Throughout the Year	Up to 50% Off Retail	Up to 25% Off Retail	,
Contacts			
Contact benefits is in lieu Of lens and frame benefit. Additional contact purchases: ***Conventional *** Disposables	\$100 Allowance Up to 20% off Up to 10% off	\$80 Allowance Retail Retail	♦\$80 Allowance
Frequency			
Exams, Lenses, Frames, Contacts	Every 12 months	Every 12 months	Every 12 months
Refractive Surgery LASIK	\$250 Off Per Eye	Not Covered	Not Covered

Summary of Benefits	TDA DHMC	tage Care) / Co-Payment Plan(b) Network Only		TDA dentalCOMP	ntage Choice ANION PPO / INDEMNITY PLAN (a) rk Only / Out-of-Network	
Preventive Office visit, cleaning, oral exam and x-rays	100% after \$10 co-pay(*)		Examples: D120 (Periodic Oral Exam) Plan Allows \$25(c,d) D1110 (Prophylaxis-Adult) Plan Allows \$56(c,d)			
Basic Simple extractions and fillings	75-80%(d) average savings(*)		Examples: D2140 (Amalgam-one Surface Prim/Prem) Plan Allows at least \$56(c,d) D3330 (Molar Root Canal) Plan Allows at least \$310(c,d)			
Major Crowns, bridges, dentures, inlays, periodontics, endodontics and oral surgery	50-60%(d) average savings(*)		Examples: D2752 (Crown-Porcelain Fused to Noble Metal) Plan Allows at least \$309(c,d) D5120 (Complete Denture-Mandibular) Plan Allows at least \$362 (c,d)			
Orthodontics	15-25% discount		25%	25% discount at participating TDA Providers / No Out of Network Benefits		
Waiting Periods	None			12 month waiting period on major services		
Deductible	None		\$50 per person per calendar year for basic and major services			
Annual Maximum	None		\$1,000 per subscriber			
Additional Information	20% discount on specialist services: Periodontist, Endodontist, Prosthodontist, pediatrics and Oral Surgeon. DHMO Network (executive plan)		dentalCOMPANION PPO / INDEMNITY PLAN (c) This percentage is based on and average savings please see plan certificate for reimbursement amount and about the plans benefits. TDA PPO Network			
Payment Method		Monthly	Monthly		Monthly Rate Over Age 65+	
All plans allow monthly payments by Visa,	Single	\$17.25	Single	\$34.89	\$41.87	
MasterCard, Discover or automatic bank	Two Party	\$34.50	Two Party	\$67.14	\$79.70	
account withdrawals.	Family	\$55.75	Family	\$110.05	\$123.38	
There is a one-time enrollment fee of \$10.00 for all new applications. All applications received after the 18th of the month start on the 1st of the following month. For plan information visit:	Vantage Care plan benefits, you can visit us online at www.vpdental.com and download our plan certificate.		TDA PPO / Vantage Choice is a defined reimbursement plan, that puts you as the consumer in the driver's seat. How the plan works, we provide you with a set dollar amount per procedure. This amount minus our contracted rate that we have set with the in-network dentist will provide you with your reimbursements. If you go out of network please remember, the plan does give you some reimbursement. However you do not receive the discounted contracted rate that we have set up with our in-network dentist, and also do not forget the dentist can balance bill for the difference.			
www.vpdental.com						

TDA / Vantage Choice Plan insured by Companion Life Insurance Company. (b) Vantage Care Plan insured and underwritten by Total Dental Administrators. For complete fee schedule please refer to the plan certificate (c) This percentage is based on and average savings please see plan certificate for reimbursement amount see the plan certificate for more information. (*) see co-pay schedule. (d) All payments made by the plan are based on the network fee schedule TDA PPO network / DHMO network. For complete details of the coverage please refer to the plan certificate. Plans may vary by state.

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Why get Vision Insurance?

Eyecare is a critical part of overall healthcare. An eye exam is more than just a means to prescription eyewear; regular comprehensice eye exams can give early detection to many eye and systemic diseases, loweing overall healthcare costs.

Ability to choose any provider Discounts on additional pairs of eyeglasses LASIK surgery discounts

Example of Savings					
Exam and eyeglasses 15-100c plan	*Retail cost without insurance	Cost with Vision Insurance	Savings		
Eyeglass exam	\$59.95	\$15.00 co-pay	\$44.95		
Standard Lenses	\$49.95	100% Covered	\$49.95		
Scratch Resistant Coating	\$20.00	100% Covered	\$20.00		
Ultra Violet Protection	\$20.00	100% Covered	\$20.00		
Frame	\$150.00	\$50.00	\$100.00		
Totals	\$259.90	\$65.00	Total Savings=		
			\$234.90		

Exam and contact lenses 15-100c plan	*Retail cost without insurance	Cost with Vision Insurance	Savings
Contact exam	\$99.95	\$15.00 co-pay	\$84.95
1-year supply of Contacts	\$279.80	\$179.80	\$100.00
Totals	\$379.79	\$194.80	Total Savings=
			\$184.95

Based on Standard Optical retail pricing.

Discounts

Any item listed as a discount in the benefit outline above is a merchandise discount only and not an insured benefit. Providers may offer additional discounts.

- ** 50% discount at Standard Optical locations Only. Out of State Network discounts vary from 20% 35%.
- *** Must purchase full year supply to receive discounts on select brands. See provider for details.

Out of Network – Allowances are reimbursed at 75% when discounts are applied to merchandise. LASIK(Refractive surgery)

LASIK services are not an insured benefit – this is a discount only. All pre & post operative care is provided by Standard Optical Only

and is based on Standard Optical retail fees.

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Plan Highlights and Features

Vantage Choice - PPO INDEMNITY Plan

A fully insured plan that allows for both in and out-of-network benefits.

- · Freedom to choose any dentist
- · 20 30% discount during waiting period
- · Over 2000 dental providers
- · Fixed reimbursement for all dental services
- Lower rates on services from in-network providers

Vantage Care – CO-PAYMENT PLAN

A comprehensive plan consisting of well established network dentists.

- · No waiting periods
- · No deductibles
- No annual or lifetime maximums
- · Fixed co-payments for all
- dental services
- · Over 1000 dental providers

Included Free With All Plans

Vision Discount Plan.

Receive savings up to 30% off retail prices on eyewear products. Plan provides unlimited use and offers easy access to thousands of vision care providers nationwide.

Hearing Services Plan.

Receive savings up to 50% below the suggested retail prices and up to 35% lower than most discount offers. Plan benefits may be shared with any family member.

Prescription Savings Plan.

Receive savings up to 50% on prescriptions at more than 55,000 national and regional pharmacies. Plan benefits may be shared with any family member.

For full details about these discounts and to access benefits please visit vpdental.com. The additional discount products and services described above are available to you as a supplement to your TDA dental plan. Discounts and plans are subject to change without notice.

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^{*} Co-pays for progressive lenses may vary. This is a summary of plan benefits. The actual Policy will detail all plan limitations and exclusions.