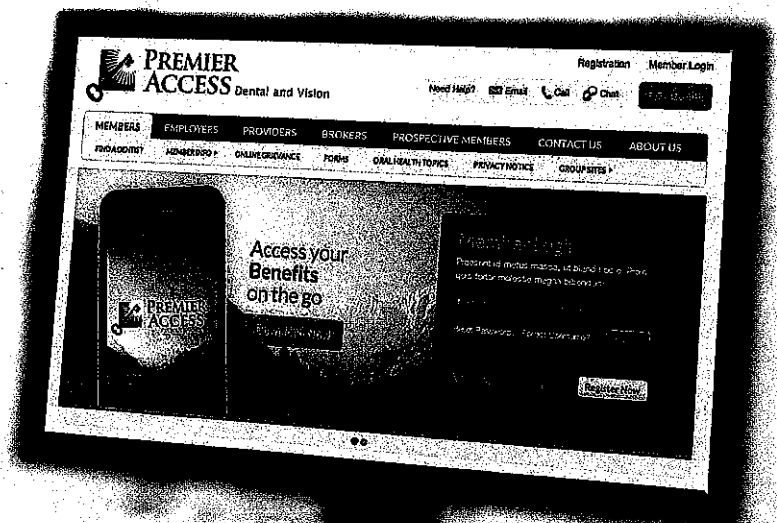


**PREMIER
ACCESS**
Medical • Dental • Vision

PREMIER ADVANTAGE

FLEXIBLE DENTAL PLANS TO
MEET YOUR CHANGING NEEDS

EMPLOYEE PLAN INFORMATION



AN OPTION THAT ALLOWS YOU TO MOVE BETWEEN THE DENTAL HMO AND PPO PLANS AS YOUR NEEDS CHANGE.

Choice in Plan Type:

The Premier Advantage plan allows you to select either a Dental Health Maintenance Organization (DHMO) managed care plan or a Dental Preferred Provider Organization (PPO) plan.

Flexibility to Change Plans:

With the Premier Advantage plan, you may switch from the DHMO to the PPO plan or vice versa throughout the year. You and your dependents must be enrolled in the same plan type, either DHMO or PPO. However, within each plan, each covered dependent may have a different primary care dentist. If you decide to switch between plans, simply send a secure email to customerservice@premierlife.com or contact our Customer Service Department at 888-715-0760. If the change request is made by the 25th of any month, the change will become effective the first of the following month. *Note: Plan changes may only be requested by the employee or the employer on behalf of the employee.*

Benefits:

- Choose the DHMO plan and you will generally have less of an out-of-pocket expense and get the greatest level of coverage.
- Choose the PPO plan and enjoy the freedom to choose any dentist. Get the greatest level of PPO coverage by choosing one of our quality Premier Choice Network (PCN) or Preferred Provider Network dentists.
- Switch between plans every month or stay in the plan you initially selected. The choice is yours.

How the Program works:

First, you choose which plan you want to enroll in: DHMO or PPO. See our online directory at www.premierlife.com for participating providers in our DHMO Network, Premier Choice Network (PCN), or our Preferred Provider Network.

Once enrolled, follow the rules of your plan (DHMO or PPO). During the year, you are free to switch between the two plans. To request a plan change simply send a secure email to customerservice@premierlife.com or contact our Customer Service Department at 888-715-0760 by the 25th of the month to make your change effective the first of the following month. Remember, you and your dependents must be enrolled in the same plan.

Your Covered Dental Services

Your Premier Advantage plan design offers you coverage for a broad range of dental services in both the DHMO and PPO plan options, including:

- Preventive Services (exams, cleanings and x-rays). The DHMO plan includes additional cleanings and adult fluoride.
- Basic Services (fillings, stainless steel crowns and extractions). The DHMO plan includes coverage for posterior composites (white fillings on back teeth).
- Major Services (crowns, bridges and dentures). The DHMO plan includes coverage for specific cosmetic procedures, nitrous oxide, certain mouth guards, and more.

Specific Covered Services and Supplies may fall under a different category than what is stated above. Age and frequency limits may apply to some services. Refer to your Schedule of Benefits for details on benefit levels and covered services.

What is not Covered?

Below is a partial list of the charges and services the Premier Advantage plan does not cover. For a complete list of exclusions and limitations, see your plan documents.

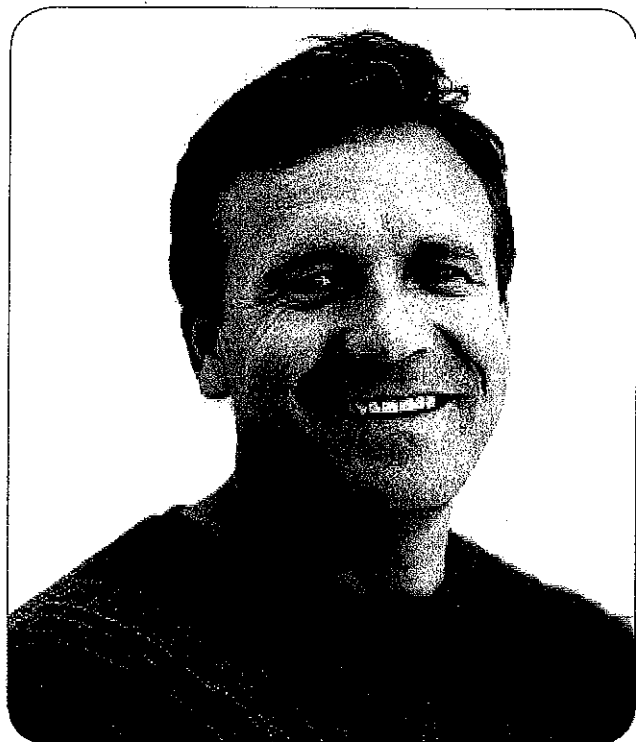
- Dental services that are primarily cosmetic in nature (except as specified in the DHMO plan).
- Experimental services, supplies or procedures.
- Treatment of any jaw joint disorder, such as temporomandibular joint dysfunction (TMJ) (except as specified in the DHMO plan or if your plan sponsor has included additional coverage).
- Replacement of lost, missing or stolen appliances and damaged appliances.
- Services that are not dentally necessary for diagnosis, care or treatment.
- All other limitations and exclusions included in your plan documents.

DHMO PLAN OVERVIEW

The DHMO out-of-pocket expenses are generally lower than the Dental PPO plan.

How the plan works:

- Copayments (a dollar amount) apply to certain treatments.
- There are no calendar year maximums, no deductibles and no claims forms.
- Routine dental care is provided by a Primary Care Dentist (PCD) who participates in the Premier Access DHMO plan.
- You must have a PCD assigned to you in order to be covered for routine dental care. Each member of your family may choose a different PCD.
- You will receive an ID card.
- Your PCD will submit a referral request to Premier Access when specialty services are necessary.
- Your plan includes orthodontic benefits for adults and children. Refer to the Schedule of Benefits for covered services and copayments.
- Emergency Care
 - ❖ Call your PCD if you require emergency care.
 - ❖ If you are outside of your service area, call Premier Access' Customer Service Department at the toll-free number on your ID card.



PPO PLAN OVERVIEW

The Dental PPO plan provides more flexibility in choosing a dentist.

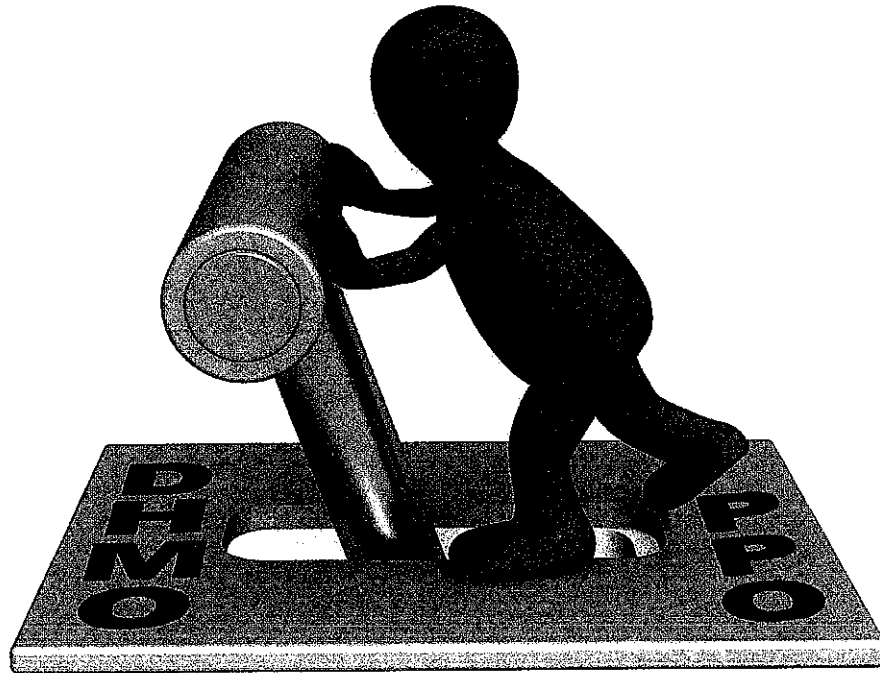
How the plan works:

- Pay coinsurance (a percentage of the covered charge) and deductibles to your dentist for covered charges. Your coinsurance will generally be lower if you visit a participating provider.
- Annual maximums will apply.
- Choose any licensed dentist.
- If your dentist participates in the Premier Choice Network (PCN) or the Preferred Provider Network, your payment will be based on negotiated fees and out-of-pocket costs will generally be lower than a non-participating provider. If your dentist is a PCN provider, your plan provides a higher level of coverage.
- You will receive an ID card.
- When you visit a participating dentist, your dentist submits the claim for you. If you visit a non-participating dentist, either you or your dentist submits the claim forms.
- Participating dentists are not permitted to charge you more than their contracted fee for covered services.
- No referrals are needed for specialty care. You are free to choose any specialist for a covered expense. See your Schedule of Benefits for details on benefits and limitations.
- Your plan may or may not include orthodontic benefits. If included, a lifetime maximum will apply.
- Emergency Care
 - ❖ See any licensed dentist if you require emergency care.
 - ❖ You may be required to submit claim forms.

**LIFE DOESN'T STAND STILL...
PREMIER ADVANTAGE
LETS YOU TAKE CONTROL.**

**IF YOU WOULD LIKE TO CHANGE YOUR BENEFIT PLAN,
PLEASE CALL CUSTOMER SERVICE AT: 888.715.0760**

Premier Advantage gives you the freedom to switch back and forth between each plan.



DHMO

No Calendar Year Maximum

No Waiting Periods

Little or No Copayment

Panel of Dentists

*Orthodontia Coverage for
Adults & Children*

PPO

*Choice of any Licensed Dentist,
Including Specialists*

*Maximize Your Benefits
With a PCN Provider*

*No Referral Required for
Specialty Services*

If you are in the middle of treatment, you are required to complete treatment in progress prior to electing to switch to a new plan.

If you would like to change your benefit plan, please contact Customer Service at:

TEL 888.715.0760 (toll free)

EMAIL CUSTOMERSERVICE@PREMIERLIFE.COM

WEB WWW.PREMIERLIFE.COM

Note: The information provided here is intended only to show the highlights of the dental plan and is not a complete description of the plan. The plan is governed by the official plan document and/or insurance contract where applicable. If there is a discrepancy between the information provided here and the plan document and/or insurance contract, the plan document and/or insurance contract will prevail. Premier Access PPO benefits are underwritten by Premier Access Insurance Company, Sacramento, CA. "Dental HMO" is used to refer to product designs that include "Specialized Health Care Service Plans" in California, by Access Dental Plan, a California Corporation.