

DENTAL, VISION & HEARING INSURANCE



PROTECTING YOUR FUTURE TODAY[®]



MEDICO[®]
INSURANCE COMPANY

www.GoMedico.com



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WHY DENTAL, VISION, HEARING COVERAGE?

When you choose Medico, you get an affordable way to cover routine care as well as the unexpected, which can be inconvenient and expensive! This is a true insurance policy, not simply a discount program.

Designed for individuals age 18 to 89:

- With no coverage or limited coverage
- On Medicare (Medicare coverage is very limited)

OVERALL BENEFITS



- Guaranteed Acceptance—no health questions
- Choose \$1,000 or \$1,500 Policy Year Maximum Benefit
- Freedom to choose any Provider
- Bonus—Choose a Provider in our Dental network for better discounts
- Low \$100 Policy Year Deductible
- Increasing percentage paid for non-Major Services
 - 60% first Policy Year
 - 70% after first Policy Year
 - 80% after 2nd Year and thereafter
- Policy pays for covered expenses, based on the contracted fee for Participating Dentists and the Reasonable and Customary Charges for Non-Participating Dentists, up to the policy maximum
- Pays you or your Provider regardless of any other policy



MONTHLY PREMIUM (\$1,000 ANNUAL BENEFIT)

Age	Premium
18-39	\$29
40-54	\$31
55-64	\$33
65-79	\$35
80-89	\$38

Premiums are subject to change.

DENTAL COVERAGE

COVERED IMMEDIATELY:

- Fillings
- Non-surgical extractions up to 4 teeth annually (excluding impacted Wisdom Teeth)
- Diagnostic X-rays
- Diagnostic Exams
- Emergency Palliative Treatment

COVERED AFTER 3 MONTHS:

- Cleaning/Examinations (twice annually)
- Examination X-rays

COVERED AFTER 1 YEAR:

- (60% Paid per Policy Year)*
- Endodontics, including Root Canals
- Periodontal Surgery
- Bridges, Crowns, full or partial Dentures

*Not a comprehensive list



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VISION COVERAGE

Covered Immediately:

- Eye Exam

Covered after 6 Months:

- Eyeglasses or Contact Lenses
- Up to \$200 over 2 years
- Part of your Policy Year Maximum Benefit

HEARING COVERAGE

Covered after 1 Year:

- Hearing Exam
- Hearing Aids
- Up to \$500 annually
- Part of your Policy Year Maximum Benefit



POLICY PROVISIONS

- Guaranteed Issue
- No Policy Fee
- No Coordination of Benefits

30-DAY FREE LOOK PERIOD

Take 30 days after you receive your policy to review your coverage. If for any reason at all you decide it is not what you had in mind, just return it to us or to the producer. We will promptly refund your premium.



ACCEPTANCE

This plan is issued individually. Premiums are determined according to your age and the benefit you select.

PROVIDER NETWORK

Maximum Care Network:

- Through one of the largest dental networks nationally with a focus on neighborhood dentists, the Maximum Care Network can help you save on services such as routine oral exams, cleanings, and major work such as dentures, root canal and crowns.
- To locate a participating dental provider, please visit www.GoMedico.com to access our online provider search.

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ABOUT THE COMPANY

PROTECTION FROM A FINANCIALLY STRONG COMPANY

Medico Insurance Company has served the insurance needs of Americans since 1930, establishing a proven track record in providing quality insurance solutions. Today, Medico Insurance Company's products are designed to help protect the financial well-being of our policyholders while our employees are dedicated to providing the kind of customer service they deserve.

To learn more about Medico Insurance Company and the products we offer, we invite you to visit our website at www.GoMedico.com.



MEDICO®

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This brochure is intended to provide a general description of the policy benefits. Policy provisions and benefits may vary from state to state. Please see the policy for further details. For costs and further details of coverage, see your producer or write to the Company. This is a solicitation of insurance and a licensed producer may contact you. THIS IS A LIMITED POLICY. THIS POLICY PROVIDES DENTAL, VISION AND HEARING BENEFITS ONLY. REVIEW YOUR POLICY CAREFULLY.

If there is a discrepancy between the brochure and contract, the contract language prevails.

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Medico® Insurance Company **Dental, Vision & Hearing Plan – Form A58**

DVH PLUS with Coverage Schedule CSA58PP

Premium Rates by Mode

Please review the premium differences in the rates shown as modal factors vary based on payment methods and frequency of payments.

Automatic Bank Withdrawal Monthly			Credit Card Monthly		
Issue Age	1,000 Max	1,500 Max	Issue Age	1,000 Max	1,500 Max
18-39	29.00	37.00	18-39	29.93	38.18
40-54	31.00	41.00	40-54	31.99	42.31
55-64	33.00	44.00	55-64	34.06	45.41
65-79	35.00	46.00	65-79	36.12	47.47
80-89	38.00	49.00	80-89	39.22	50.57

Automatic Bank Withdrawal Quarterly			Credit Card Quarterly		
Issue Age	1,000 Max	1,500 Max	Issue Age	1,000 Max	1,500 Max
18-39	87.00	111.00	18-39	89.78	114.55
40-54	93.00	123.00	40-54	95.98	126.94
55-64	99.00	132.00	55-64	102.17	136.22
65-79	105.00	138.00	65-79	108.36	142.42
80-89	114.00	147.00	80-89	117.65	151.70

Direct Bill Quarterly		
Issue Age	1,000 Max	1,500 Max
18-39	93.96	119.88
40-54	100.44	132.84
55-64	106.92	142.56
65-79	113.40	149.04
80-89	123.12	158.76

Automatic Bank Withdrawal Semi-Annually			Credit Card Semi-Annually		
Issue Age	1,000 Max	1,500 Max	Issue Age	1,000 Max	1,500 Max
18-39	174.00	222.00	18-39	179.22	228.66
40-54	186.00	246.00	40-54	191.58	253.38
55-64	198.00	264.00	55-64	203.94	271.92
65-79	210.00	276.00	65-79	216.30	284.28
80-89	228.00	294.00	80-89	234.84	302.82

Direct Bill Semi-Annually		
Issue Age	1,000 Max	1,500 Max
18-39	180.96	230.88
40-54	193.44	255.84
55-64	205.92	274.56
65-79	218.40	287.04
80-89	237.12	305.76

Automatic Bank Withdrawal Annually			Credit Card Annually		
Issue Age	1,000 Max	1,500 Max	Issue Age	1,000 Max	1,500 Max
18-39	348.00	444.00	18-39	358.44	457.32
40-54	372.00	492.00	40-54	383.16	506.76
55-64	396.00	528.00	55-64	407.88	543.84
65-79	420.00	552.00	65-79	432.60	568.56
80-89	456.00	588.00	80-89	469.68	605.64

Direct Bill Annually		
Issue Age	1,000 Max	1,500 Max
18-39	348.00	444.00
40-54	372.00	492.00
55-64	396.00	528.00
65-79	420.00	552.00
80-89	456.00	588.00

Premium Withdrawal

If the applicant chooses the Automatic Bank Withdrawal or Credit Card method of payment and the application is submitted without any premium, the initial premium will be drafted from the Insured's account on the Policy Date (effective date of coverage).

Note: Unless a future Effective Date is requested, the premium will be drawn as soon as the policy is issued. Please make sure the applicant is aware of this.

Policy Effective Date

Effective Date can be any day from the 1st through the 28th of the month, and must be less than 90 days after the Application Date. If no Effective Date is requested, the Effective Date will be the day the application is approved by our Underwriting Department.

If you have questions, please call 1-800-547-2401 – Option 3

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