



January, 2006

Announcing GroupLink's NEW FLEXIDENT®

Flexident is back! GroupLink, Inc has brought back one of its most popular dental products. The new Flexident is an exciting, competitive and improved version of their old classic. These new plans are underwritten by Madison National Life Insurance Company (A.M.Best rated "A-").

Some product features include:

- Seven plans - custom plans for groups of 10+.
- Plans from two lives on Employer Paid and 5 lives enrolled on Voluntary.
- Voluntary plan options with NO participation requirements.
- Employees may choose from multiple plan options in groups of 10+.
- No waiting periods.
- Implants, Teeth Whitening, Veneers and Rollover max options.
- Brochure or custom design plans and rates.
- Indemnity and PPO Plans.
- Expert administration from GroupLink- celebrating their 23rd year as a Dental TPA.
- Expert sales advice from Allied Brokerage Services.

Attached are product brochures and rate sheets. Please check our web site for the latest state approvals. The state approval list is located on the "Group Dental" or "Vol Grp Dental" pages under "Group Products in the Menu. Our address is www.allied-brokerage.com

If you would like an illustration on a specific case simply email or fax the census and plan information to us. We would like to know who the current carrier is, the plan design and rates. You can contact us:

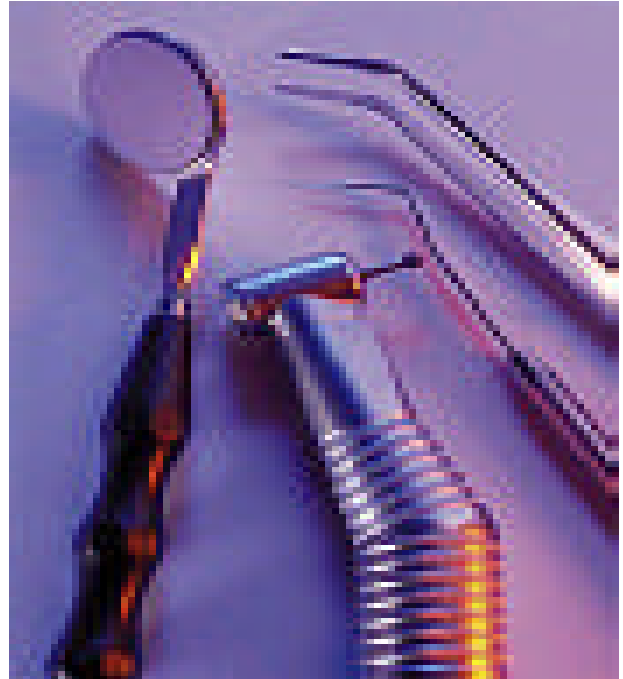
Via email at sales@allied-brokerage.com

Or

Via fax at 816-412-8678.

We are looking forward to assisting you with your next sale!

Flexident[®]



**Dental plans designed to
provide choice and flexibility
for groups of 2 or more**

Plans underwritten by:



Madison National Life Insurance Company, Inc. and in some states, Standard Security Life Insurance Company of New York

Group **Link**[®] *Inc.*

For Agent Use Only - Not for use as a solicitation device

The Flexident Advantage

Flexident provides seven different plan options as outlined on the chart on the following page. Flexident offers even more options for deductibles, coinsurance and maximum amounts for groups of ten or more covered lives. Additionally, groups of ten or more covered lives have the option of adding orthodontia benefits.

Group insurance premiums are based on zip code, and may be paid by the employer or by the employee through convenient payroll deduction.

All plans offer the freedom to choose any dentist and all plans provide access to PPO discounts if a network provider is utilized. This can save on out of pocket costs as well as non-covered expenses.

PPO plans with lower premiums are also available allowing greater coverage for those utilizing in-network providers.

Experienced Administration

For your convenience, GroupLink offers you an experienced team that has been administering group dental benefits since 1983. Our team takes care of these details for you:

- New group setup
- Complete case underwriting
- Policy, certificate and ID card issue
- Premium billing and accounting
- Fast and accurate claims administration
- Renewal notification and underwriting
- Employee brochures and enrollment materials

Eligible Employees & Coverages

Flexident plans are available to employer/employee groups and their retirees. The plans can also cover spouses and both natural and adopted children (age limits vary by state) if enrolled full-time at an accredited institution (and not working full-time). The following services are covered:

Preventive:	cleanings, exams, sealants, fluoride
Diagnostic:	x-rays; full mouth and bitewing
Basic:	fillings, extractions, repairs
Major:	endodontics, periodontics, oral surgery, crowns, bridges
Orthodontia:	optional for groups of 10+ enrolled employees

Teeth Whitening, Implants, Veneers available as add-on options

Schedule of Benefits

**All Plans, All Coverages -
Zero Waiting Periods!**

Service	Super Value Plan	Value Plan	Scheduled Plan	Co-Pay Plan	Economy Plan	Primary Plan	Superior Plan
Preventive Cleanings, exams, Sealants, flouride	80% 1 per year	100% 1 per year	All benefits are paid by fee schedule	100% 1 per year	100% 1 per year	100% 2 per year	100% 2 per year
Diagnostic Bitewing X-rays Full mouth X-rays	Discount	80% 1 per year 1 per 3 years		80% 1 per year 1 per 3 years	80% 1 per year 1 per 3 years	80% 1 per year 1 per 3 years	100% 1 per year 1 per 3 years
Basic Fillings Extractions Repairs	Discount	Discount		25/75%	25/75%	25/75%	25/80%
Major Endodontics Periodontics Oral Surgery Crowns Bridges	Discount	Discount		10/40%	10/40%	10/50%	10/50%
Deductible Annual Maximum	0 \$250	0 \$250	\$100 lifetime \$1,000	\$100 lifetime \$1,250	\$100 lifetime \$1,000	\$100 lifetime \$1,250	\$100 lifetime \$1,500

For additional options and plan customization, please contact your GroupLink Sales Representative or our Marketing Team at 800-935-2009, option 7.

Underwriting Guidelines

Employee Choice

Flexident allows the opportunity for Employees to choose from multiple plan options depending on the size of the group. Employee Choice options include:

2-9 lives	1 plan option
10-49 lives	up to 2 plan options
50+ lives	up to 3 plan options

Participation Requirements

Size	Employee	Dependents	Waivers Accepted
2-4 lives	100%	100%	No
5+ lives	5 lives enrolled	N/A	Yes

The GroupLink Advantage

“To serve our representatives with competitive products and pricing while exceeding customer service expectations.” - GroupLink Mission Statement

Service

GroupLink is a full service company including Third Party Administration, Program Management, Producer Marketing and Sales Assistance. Our customer-based service is truly outstanding, with industry leading turn around times for all aspects of our business, such as: producer contact to discuss submitted quotes (within 24 hours), new case issue (within 10 days of receipt of all information), employee adds/deletes (within 48 hours) and claims processing (within 5 working days). We provide policyholders with timely and accurate billing statements and providers with speedy payments, which results in satisfied customers. By making it easy to do business with us, we allow you to spend more time on your business and less time with service issues.

Dental Specialists

2005 marks GroupLink's 22nd anniversary as a marketer and administrator of dental benefits. We have a proven history of success and are very proud of what we have accomplished. We believe in a process of continuous improvement and constantly seek ways to enhance the GroupLink suite of products and services.

Accessibility

Our entire staff and management team is always very accessible and eager to answer your questions. Our claims department is open extended hours to serve you as well. You will be able to access a member of our staff in all departments most times during regular business hours or you will receive a returned phone call in a timely manner.

Support

We cannot over-emphasize the importance of our GroupLink broker network. Our commitment to helping our policyholders means that our qualified producers rely on us for support and assistance in meeting and exceeding service expectations. GroupLink provides complete producer services, including education, training, promotion, marketing, and incentive programs.

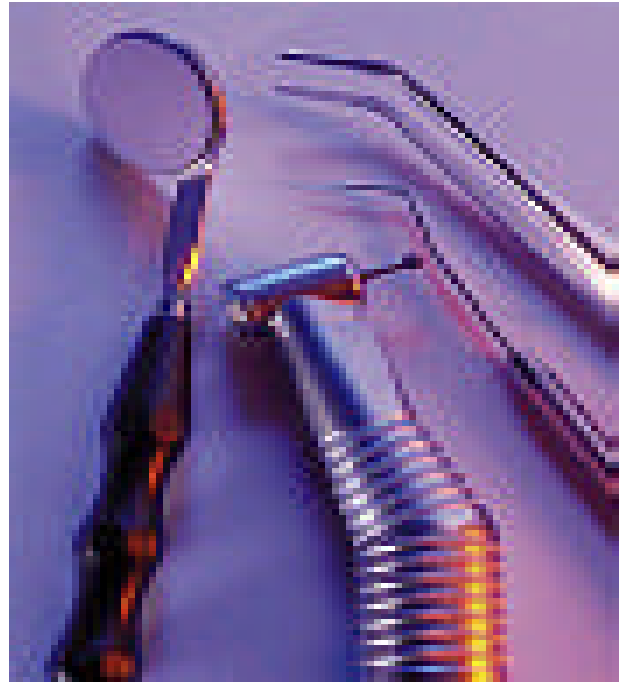
Satisfaction

We have proven that by combining the skill and knowledge of staff members who truly care with expertise of producers who also care, we can achieve the highest level of customer service and ultimately, customer satisfaction. Our goal is to have 100% of our customers satisfied with their GroupLink experience.

Corporate Headquarters
6612 E. 75th Street, Suite 200
Indianapolis, IN 46256

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sales@grouplinktpa.com

Flexident[®]



Indemnity Plan Rates, Plan Options and Area Designations

Plans underwritten by:



Madison National Life Insurance Company, Inc. and in some states, Standard Security Life Insurance Company of New York



For Agent Use Only - Not for use as a solicitation device

Employer Paid 50-99 Lives

	Area 1	Area 2	Area 3	Area 4	Area 5	Area 6	Area 7	Area 8
Super Value Plan								
Employee	\$4.53	\$5.09	\$5.59	\$6.10	\$6.66	\$7.16	\$7.83	\$8.95
Employee/Spouse	\$9.06	\$10.18	\$11.19	\$12.19	\$13.31	\$14.32	\$15.66	\$17.90
EE+Child(ren)	\$9.34	\$10.50	\$11.54	\$12.57	\$13.73	\$14.77	\$16.15	\$18.46
Family	\$15.31	\$17.20	\$18.90	\$20.60	\$22.49	\$24.19	\$26.46	\$30.24
Value Plan								
Employee	\$5.91	\$6.64	\$7.30	\$7.95	\$8.68	\$9.34	\$10.22	\$11.68
Employee/Spouse	\$11.82	\$13.28	\$14.60	\$15.91	\$17.37	\$18.68	\$20.43	\$23.35
EE+Child(ren)	\$12.19	\$13.69	\$15.05	\$16.40	\$17.91	\$19.26	\$21.07	\$24.08
Family	\$19.97	\$22.43	\$24.65	\$26.87	\$29.33	\$31.55	\$34.51	\$39.44
Scheduled Plan								
Employee	\$18.33	\$18.33	\$18.33	\$18.33	\$18.33	\$18.33	\$18.33	\$18.33
Employee/Spouse	\$36.67	\$36.67	\$36.67	\$36.67	\$36.67	\$36.67	\$36.67	\$36.67
EE+Child(ren)	\$37.80	\$37.80	\$37.80	\$37.80	\$37.80	\$37.80	\$37.80	\$37.80
Family	\$61.95	\$61.95	\$61.95	\$61.95	\$61.95	\$61.95	\$61.95	\$61.95
Co-Pay Plan								
Employee	\$13.46	\$15.13	\$16.62	\$18.12	\$19.78	\$21.28	\$23.27	\$26.59
Employee/Spouse	\$26.93	\$30.26	\$33.25	\$36.24	\$39.57	\$42.56	\$46.55	\$53.20
EE+Child(ren)	\$27.77	\$31.20	\$34.28	\$37.37	\$40.80	\$43.88	\$48.00	\$54.85
Family	\$45.50	\$51.12	\$36.18	\$61.23	\$66.85	\$71.91	\$78.65	\$89.88
Economy Plan								
Employee	\$14.05	\$15.78	\$17.34	\$18.90	\$20.64	\$22.20	\$24.28	\$27.75
Employee/Spouse	\$28.10	\$31.56	\$34.69	\$37.81	\$41.28	\$44.40	\$48.56	\$55.50
EE+Child(ren)	\$28.96	\$32.54	\$35.76	\$38.98	\$42.55	\$45.77	\$50.06	\$57.21
Family	\$47.47	\$53.33	\$58.60	\$63.88	\$69.74	\$75.01	\$82.05	\$93.77
Primary Plan								
Employee	\$17.06	\$19.17	\$21.06	\$22.96	\$25.06	\$26.96	\$29.49	\$33.70
Employee/Spouse	\$34.12	\$38.33	\$42.13	\$45.92	\$50.13	\$53.92	\$58.98	\$67.40
EE+Child(ren)	\$35.17	\$39.51	\$43.42	\$47.33	\$51.67	\$55.58	\$60.79	\$69.48
Family	\$57.64	\$64.76	\$71.17	\$77.57	\$84.69	\$91.09	\$99.63	\$113.86
Superior Plan								
Employee	\$18.41	\$20.68	\$22.73	\$24.78	\$27.05	\$29.09	\$31.82	\$36.37
Employee/Spouse	\$36.83	\$41.38	\$45.47	\$49.56	\$54.11	\$58.20	\$63.66	\$72.75
EE+Child(ren)	\$37.97	\$42.66	\$46.87	\$51.09	\$55.78	\$60.00	\$65.62	\$75.00
Family	\$62.23	\$69.91	\$76.82	\$83.74	\$91.42	\$98.33	\$107.55	\$122.91

For groups of 10-49 lives, multiply above rates by 1.110

For groups of 2-9 lives, multiply above rates by 1.227

For groups with SIC codes of 8100-9999, multiply above rates by 1.20 - Dentist offices ineligible.

Plan Options

Frequency Limits - increase cleanings to 2 or 3 per year

Type of Service - move endodontics and/or periodontics from Major services to Basic services

Coinsurance-

Preventive - 70,80 or 90%

Diagnostic - 70,80 or 90%

Basic - 50,60,75 or 80%

Major - 30,40,50, or 60%

Ortho - 25 or 50%

Deductible -

Waive for Preventive/Diagnostic

\$50 or \$25 Annual

\$0 Annual - only available if replacing zero deductible plan or with GroupLink approval

Annual Maximums -

\$250, \$500, \$750, \$1,000, \$1,250, \$1,500 or \$2,000

Annual Maximum Rollover Option - Contact GroupLink for details

Voluntary 50-99 Lives

	Area 1	Area 2	Area 3	Area 4	Area 5	Area 6	Area 7	Area 8
Super Value Plan								
Employee	\$4.98	\$5.60	\$6.15	\$6.70	\$7.32	\$7.87	\$8.61	\$9.84
Employee/Spouse	\$9.97	\$11.20	\$12.31	\$13.42	\$14.65	\$15.76	\$17.23	\$19.70
EE+Child(ren)	\$10.28	\$11.55	\$12.69	\$13.83	\$15.10	\$16.24	\$17.77	\$20.30
Family	\$16.84	\$18.92	\$20.79	\$22.66	\$24.74	\$26.61	\$29.11	\$33.26
Value Plan								
Employee	\$6.50	\$7.31	\$8.03	\$8.75	\$9.56	\$10.28	\$11.24	\$12.85
Employee/Spouse	\$13.01	\$14.61	\$16.06	\$17.51	\$19.11	\$20.56	\$22.48	\$25.70
EE+Child(ren)	\$13.41	\$15.06	\$16.55	\$18.04	\$19.69	\$21.18	\$23.17	\$26.48
Family	\$21.97	\$24.68	\$27.12	\$29.56	\$32.27	\$34.71	\$37.97	\$43.39
Scheduled Plan								
Employee	\$18.33	\$18.33	\$18.33	\$18.33	\$18.33	\$18.33	\$18.33	\$18.33
Employee/Spouse	\$36.67	\$36.67	\$36.67	\$36.67	\$36.67	\$36.67	\$36.67	\$36.67
EE+Child(ren)	\$37.80	\$37.80	\$37.80	\$37.80	\$37.80	\$37.80	\$37.80	\$37.80
Family	\$61.95	\$61.95	\$61.95	\$61.95	\$61.95	\$61.95	\$61.95	\$61.95
Co-Pay Plan								
Employee	\$14.81	\$16.63	\$18.28	\$19.93	\$21.75	\$23.40	\$25.59	\$29.25
Employee/Spouse	\$29.70	\$33.37	\$36.67	\$39.97	\$43.64	\$46.94	\$51.34	\$58.67
EE+Child(ren)	\$30.62	\$34.40	\$37.80	\$41.20	\$44.98	\$48.38	\$52.92	\$60.48
Family	\$50.18	\$56.37	\$61.95	\$67.53	\$73.72	\$79.30	\$86.73	\$99.12
Economy Plan								
Employee	\$15.45	\$17.36	\$19.08	\$20.80	\$22.71	\$24.42	\$26.71	\$30.53
Employee/Spouse	\$30.90	\$34.72	\$38.15	\$41.58	\$45.40	\$48.83	\$53.41	\$61.04
EE+Child(ren)	\$31.86	\$35.79	\$39.33	\$42.87	\$46.80	\$50.34	\$55.06	\$62.93
Family	\$52.22	\$58.67	\$64.47	\$70.27	\$76.72	\$82.52	\$90.26	\$103.15
Primary Plan								
Employee	\$18.77	\$21.08	\$23.17	\$25.26	\$27.57	\$29.66	\$32.44	\$37.07
Employee/Spouse	\$37.54	\$42.17	\$46.34	\$50.51	\$55.14	\$59.32	\$64.88	\$74.14
EE+Child(ren)	\$38.69	\$43.47	\$47.77	\$52.07	\$56.85	\$61.15	\$66.88	\$76.43
Family	\$63.41	\$71.29	\$78.28	\$85.33	\$93.15	\$100.20	\$109.59	\$125.25
Superior Plan								
Employee	\$20.25	\$22.75	\$25.00	\$27.25	\$29.75	\$32.00	\$35.00	\$40.00
Employee/Spouse	\$40.52	\$45.52	\$50.02	\$54.52	\$59.52	\$64.03	\$70.03	\$80.03
EE+Child(ren)	\$41.76	\$46.92	\$51.56	\$56.20	\$61.36	\$66.00	\$72.18	\$82.50
Family	\$68.45	\$76.90	\$84.50	\$92.11	\$100.56	\$108.16	\$118.30	\$135.20

For groups of 10-49 lives, multiply above rates by 1.110

For groups of 2-9 lives, multiply above rates by 1.227

For groups with SIC codes of 8100-9999, multiply above rates by 1.20 - Dentist offices ineligible.

Plan Options (cont.)

Waiting Periods -

Preventive - 3,6,9 or 12 months

Diagnostic - 3,6,9 or 12 months

Basic - 0,3,6,9 or 12 months

Major - 0,3,6,9,12,18 or 24 months (12 months or higher required for Voluntary)

Ortho - 12,18 or 24 months

Orthodontia Benefits -

Coinsurance - 25 or 50%

Lifetime Maximum - \$500, \$750, \$1,000, \$1,250 and \$1,500

Other Options

Teeth Whitening

Implants

Veneers

State	Zip Code	Area	State	Zip Code	Area
Alabama	All	1	Missouri	630-634, 640-641	2
Alaska	All	8		All Others	1
Arizona	850-853	3	Montana	All	2
	All Others	2	Nebraska	All	1
Arkansas	All	1	Nevada	893-898	5
California	900-904, 940-944	6		All Others	4
	905-916, 926-931, 945-951	5	New Hampshire	All	4
	All Others	4	New Jersey	70, 74-76, 78-79 88-89	5
Colorado	800-804, 808-809	4		All Others	4
	All Others	3	New Mexico	All	2
Connecticut	68-69	6	New York	100-102	8
	All Others	5		103-114	5
Delaware	All	5		115-119	4
Dist. of Columbia	All	5		120-129	3
Florida	330, 332-334, 340	4		All Others	2
	331	5	North Carolina	275-277	3
	All Others	3		282	4
Georgia	301-302	3		All Others	2
	300, 303, 311	4	North Dakota	All	1
	All Others	2	Ohio	430-432, 434-436, 439-445, 450-452, 456	2
Hawaii	All	4		All Others	1
Idaho	837	3	Oklahoma	730-731, 740-741	2
	All Others	1		All Others	1
Illinois	600-608	4	Oregon	970-975	4
	610-619	2		All Others	3
	All Others	1	Pennsylvania	189-194	4
Indiana	460-466, 469, 473	2		All Others	2
	All Others	1	Rhode Island	All	3
Iowa	All	2	South Carolina	All	2
Kansas	660-661, 664-666, 672	2	South Dakota	All	1
	All Others	1	Tennessee	370-372, 380-384	2
Kentucky	All	1		All Others	1
Louisiana	700-701, 707-712	2	Texas	762-764, 768-769, 788, 790-799	2
	All Others	1		750-753, 760, 761, 770, 772-777, 786-787, 789	3
Maine	All	3		All Others	1
Maryland	206-209	4	Utah	All	3
	210-214	3	Vermont	All	2
	All Others	2	Virginia	201	5
Massachusetts	017-022	5		220-223	4
	All Others	4		233-237	3
Michigan	480-485	3		All Others	2
	All Others	2	Washington	980-981	6
Minnesota	554	4		982-986	5
	550-553, 555	3		All Others	4
	All Others	2	West Virginia	All	1
Mississippi	All	1	Wisconsin	532-534, 537	3
				All Others	2
			Wyoming	All	1

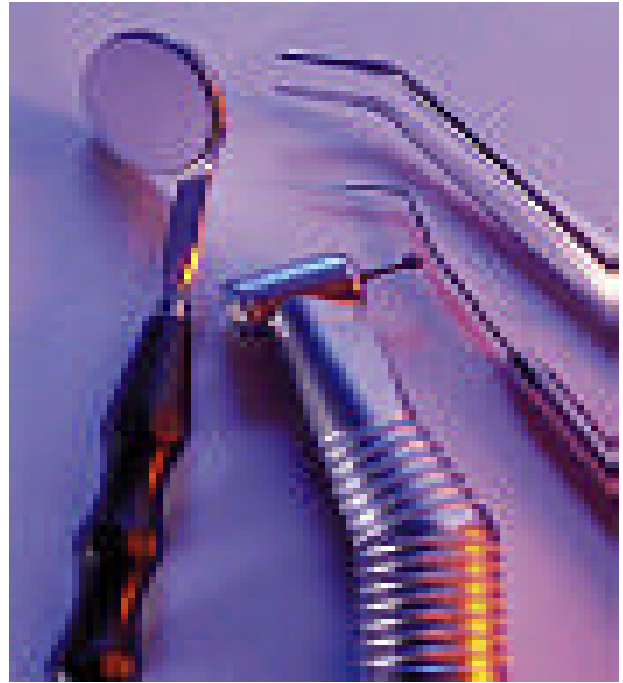
Corporate Headquarters

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Contact Information

800-935-2009
317-578-7128
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Flexident[®]



PPO Rates and Plan Options

Plans underwritten by:



Madison National Life Insurance Company, Inc. and in some states, Standard Security Life Insurance Company of New York

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Employer Paid 50-99 Lives

	Area 1	Area 2	Area 3	Area 4	Area 5	Area 6	Area 7
Super Value Plan							
Employee	\$3.74	\$4.13	\$4.46	\$4.59	\$4.79	\$5.52	\$6.02
Employee/Spouse	\$7.48	\$8.26	\$8.91	\$9.19	\$9.58	\$11.04	\$12.04
EE+Child(ren)	\$7.72	\$8.52	\$9.19	\$9.47	\$9.88	\$11.38	\$12.42
Family	\$12.64	\$13.95	\$15.05	\$15.52	\$16.19	\$18.65	\$20.34
Value Plan							
Employee	\$4.88	\$5.39	\$5.81	\$5.99	\$6.25	\$7.20	\$7.86
Employee/Spouse	\$9.76	\$10.78	\$11.63	\$11.99	\$12.50	\$14.40	\$15.71
EE+Child(ren)	\$10.06	\$11.11	\$11.99	\$12.36	\$12.89	\$14.85	\$16.20
Family	\$16.49	\$18.20	\$19.64	\$20.25	\$21.12	\$24.32	\$26.54
Co-Pay Plan							
Employee	\$11.12	\$12.27	\$13.24	\$13.65	\$14.24	\$16.40	\$17.89
Employee/Spouse	\$22.24	\$24.55	\$26.49	\$27.31	\$28.48	\$32.81	\$35.79
EE+Child(ren)	\$22.93	\$25.32	\$27.31	\$28.16	\$29.37	\$33.83	\$36.90
Family	\$37.57	\$41.48	\$44.75	\$46.14	\$48.12	\$55.43	\$60.47
Economy Plan							
Employee	\$11.60	\$12.81	\$13.82	\$14.24	\$14.86	\$17.11	\$18.67
Employee/Spouse	\$23.20	\$25.61	\$27.63	\$28.49	\$29.71	\$34.23	\$37.34
EE+Child(ren)	\$23.92	\$26.41	\$28.49	\$29.37	\$30.63	\$35.28	\$38.49
Family	\$39.20	\$43.28	\$46.68	\$48.13	\$50.20	\$57.83	\$63.09
Primary Plan							
Employee	\$14.09	\$15.55	\$16.78	\$17.30	\$18.04	\$20.78	\$22.67
Employee/Spouse	\$28.17	\$31.11	\$33.56	\$34.60	\$36.09	\$41.57	\$45.35
EE+Child(ren)	\$29.04	\$32.06	\$34.59	\$35.66	\$37.20	\$42.85	\$46.74
Family	\$47.60	\$52.55	\$56.69	\$58.45	\$60.96	\$70.22	\$76.61
Superior Plan							
Employee	\$15.20	\$16.78	\$18.11	\$18.67	\$19.47	\$22.43	\$24.47
Employee/Spouse	\$30.41	\$33.58	\$36.22	\$37.34	\$38.95	\$44.87	\$48.95
EE+Child(ren)	\$31.35	\$34.61	\$37.34	\$38.50	\$40.15	\$46.25	\$50.46
Family	\$51.38	\$56.73	\$61.20	\$63.09	\$65.81	\$75.80	\$82.69

For groups of 10-49 lives, multiply above rates by 1.110

For groups of 2-9 lives, multiply above rates by 1.227

For groups with SIC codes of 8100-9999, multiply above rates by 1.20 - Dentist offices ineligible.

Please see back page for state listing by area factor

PPO Benefits

GroupLink offers two PPO plan options. For those using an In-network provider, the benefits match the Indemnity benefits outlined in the FLEXIDENT product brochure. For Out-of-network benefits, each group must select one option. The rates for both options are the same. With either option, network providers do not balance bill.

Option 1 - MAC Plan

MAC stands for Maximum Allowable Charge. With this option, the benefit is payable as a percentage of the network fee schedule regardless of whether the treatment is provided by a network provider. Out of network charges in excess of the network fee schedule are the responsibility of the insured. Available to all plans options except the Scheduled Plan.

Voluntary 50-99 Lives

	Area 1	Area 2	Area 3	Area 4	Area 5	Area 6	Area 7
Super Value Plan							
Employee	\$4.12	\$4.54	\$4.90	\$5.05	\$5.27	\$6.07	\$6.62
Employee/Spouse	\$8.23	\$9.09	\$9.80	\$10.11	\$10.54	\$12.14	\$13.25
EE+Child(ren)	\$8.49	\$9.37	\$10.11	\$10.42	\$10.87	\$12.52	\$13.66
Family	\$13.90	\$15.35	\$16.56	\$17.07	\$17.81	\$20.51	\$22.38
Value Plan							
Employee	\$5.37	\$5.93	\$6.40	\$6.59	\$6.88	\$7.92	\$8.64
Employee/Spouse	\$10.74	\$11.86	\$12.79	\$13.19	\$13.75	\$15.84	\$17.28
EE+Child(ren)	\$11.07	\$12.22	\$13.19	\$13.59	\$14.18	\$16.33	\$17.82
Family	\$18.14	\$20.02	\$21.60	\$22.27	\$23.23	\$26.76	\$29.19
Co-Pay Plan							
Employee	\$12.23	\$13.50	\$14.56	\$15.02	\$15.66	\$18.04	\$19.68
Employee/Spouse	\$24.46	\$27.01	\$29.14	\$30.04	\$31.33	\$36.09	\$39.37
EE+Child(ren)	\$25.22	\$27.85	\$30.04	\$30.97	\$32.30	\$37.21	\$40.59
Family	\$41.33	\$45.63	\$49.23	\$50.75	\$52.93	\$60.97	\$66.52
Economy Plan							
Employee	\$12.76	\$14.09	\$15.20	\$15.67	\$16.34	\$18.82	\$20.54
Employee/Spouse	\$25.52	\$28.17	\$30.39	\$31.34	\$32.68	\$37.65	\$41.07
EE+Child(ren)	\$26.31	\$29.05	\$31.33	\$32.31	\$33.69	\$38.81	\$42.34
Family	\$43.12	\$47.60	\$51.35	\$52.95	\$55.22	\$63.61	\$69.39
Primary Plan							
Employee	\$15.50	\$17.11	\$18.46	\$19.03	\$19.85	\$22.86	\$24.94
Employee/Spouse	\$30.99	\$34.22	\$36.91	\$38.06	\$39.69	\$45.72	\$49.88
EE+Child(ren)	\$31.95	\$35.27	\$38.05	\$39.23	\$40.92	\$47.13	\$51.42
Family	\$52.36	\$57.81	\$62.36	\$64.29	\$67.06	\$77.24	\$84.27
Superior Plan							
Employee	\$16.72	\$18.46	\$19.92	\$20.53	\$21.42	\$24.67	\$26.91
Employee/Spouse	\$33.45	\$36.93	\$39.84	\$41.08	\$42.85	\$49.35	\$53.84
EE+Child(ren)	\$34.49	\$38.07	\$41.07	\$42.35	\$44.17	\$50.88	\$55.50
Family	\$56.52	\$62.40	\$67.32	\$69.40	\$72.39	\$83.38	\$90.96

For groups of 10-49 lives, multiply above rates by 1.110

For groups of 2-9 lives, multiply above rates by 1.227

For groups with SIC codes of 8100-9999, multiply above rates by 1.20 - Dentist offices ineligible.

Please see back page for state listing by area factor

PPO Benefits (cont.)

Option 2 - Incentive Plan

This option provides a higher coinsurance percentage for in-network providers compared to out-of-network thus reducing the out-of-pocket expense to the insured. Only available for the Economy, Primary and Superior plans.

Out of Network Coinsurance Percentages for Option 2 - Incentive Plan

Plan 1 80/60/40	Plan 2 70/50/30	Plan 3 60/40/30
All states not listed in Plan 2 or Plan 3 columns and California PPO 2	California PPO 1 Connecticut Delaware Dist. of Columbia Florida Massachusetts Utah	Alaska New York

PPO Benefits (cont.)

Frequency Limits - increase cleanings to 2 or 3 per year

Type of Service - move endodontics and/or periodontics from Major services to Basic services

Deductible -

Waive for Preventive/Diagnostic

\$50 or \$25 Annual

\$0 Annual - only available if replacing zero deductible plan or with GroupLink approval

Annual Maximums -

\$250, \$500, \$750, \$1,000, \$1,250, \$1,500 or \$2,000

Annual Maximum Rollover Option - Contact GroupLink for details

Waiting Periods -

Preventive - 3,6,9 or 12 months

Diagnostic - 3,6,9 or 12 months

Basic - 0,3,6,9 or 12 months

Major - 0,3,6,9,12,18 or 24 months (12 months or higher required for Voluntary)

Ortho - 12,18 or 24 months

Orthodontia Benefits -

Coinsurance - 25 or 50%

Lifetime Maximum - \$500, \$750, \$1,000, \$1,250 and \$1,500

Other Options

Teeth Whitening

Implants

Veneers

State Listing by Area (use this chart along with the rate chart on previous pages)

Area 1	Area 2	Area 3	Area 4	Area 5	Area 6	Area 7
Alabama Arkansas Kentucky Louisiana Ohio Oklahoma South Carolina Tennessee Utah West Virginia Wisconsin	Arizona Georgia Illinois Iowa Michigan Mississippi Nebraska New Mexico North Carolina Pennsylvania Rhode Island Texas	Colorado Delaware Florida Kansas Maine Minnesota New Hampshire New York Vermont Virginia	Maryland Missouri	Alaska California PPO 1 Connecticut Dist of Columbia Hawaii Idaho Indiana Massachusetts Montana Nevada New Jersey North Dakota Oregon South Dakota Wyoming	California PPO 2	Washington

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