



# Guardian Dental PPO VOLUNTARY Benefit and Rate Sheet for 2026 Effective Dates

Available in CA<sup>1</sup>  
Group Size: 1+

Choose One Plan:				
Plan Name	Split Value DT F0060H		1500 Standard DT F0237A	
Network	DentalGuard Preferred IN NETWORK	OUT OF NETWORK	DentalGuard Preferred IN NETWORK	OUT OF NETWORK
<b>Deductible</b>				
Individual	\$50	\$75	\$50	\$50
Family	3 per family	3 per family	3 per family	3 per family
Waived for Preventive	Yes	No	Yes	No
Annual Max Benefit	\$1500	\$1000	\$1500	\$1500
Orthodontic Lifetime Max	\$1000	\$1000	\$1100	\$1100
<b>Dental Benefit</b>				
<b>Preventive Services</b>	100%	90%	100%	100%
Cleaning Allowances	Once every 6 months	Once every 6 months	Once every 6 months	Once every 6 months
<b>Basic Services</b>	80%	50%	80%	80%
Endodontic	Major Service 50%	0%	Major Service 50%	Major Service 50%
Periodontal	Major Service 50%	0%	Major Service 50%	Major Service 50%
Oral Surgery	Major Service 50%	0%	Major Service 50%	Major Service 50%
<b>Major Services</b>	50%	0%	50%	50%
Prosthodontics	50%	0%	50%	50%
Implants	No <sup>2</sup>	No <sup>2</sup>	No <sup>2</sup>	No <sup>2</sup>
Reimbursement Schedule	PPO Fee Schedule	PPO Fee Schedule	PPO Fee Schedule	PPO Fee Schedule
<b>Orthodontic Benefit</b>				
Orthodontics	50%		50%	
Orthodontics Available To	Adult or Child		Adult or Child	
<b>Monthly Rates</b>				
Member Only	\$45.14		\$60.79	
Member + Spouse/DP	\$88.60		\$119.45	
Member + 1 Child	\$88.60		\$119.45	
Member + Children	\$116.92		\$157.69	
Member + Family	\$116.92		\$157.69	
Rate Guarantee	1 year		1 year	
Monthly Admin Fee	\$15			

SIC code is required. Certain industries are ineligible to purchase these plans, such as: Dental Offices 8021, Dental Labs 8071, Medical Labs 8072, and Seasonal Employees, Part-time help and groups without an SIC. This is a summary of benefits. For more detailed information, view the carrier's Summary of Benefits.

<sup>1</sup> Guardian plans are available to groups of 1 or more enrolled employees. Group must be headquartered in CA. Employees and their enrolled dependents must reside in CA. Voluntary plans assume employer is paying 0%-100% of the member's premium.

<sup>2</sup> Not covered.