



Dental Rate Card

New Jersey

Group Size 10-50

Area 1-2

Effective Date 1/1/2019 - 6/15/2019

DENTAL RATE CARD – Groups 10-50 enrolled

New Jersey - Rate Area 1

Zips: 071,073,074,075,078,079,080,081,082,083,084,086

Effective dates 1/1/2019 - 6/15/2019

All Plans are customizable down to 2 enrolled lives. Rates assume prior coverage. For additional information please contact your sales representative below.

	Option 1	Option 2	Option 3	Option 4
Deductible (ind/fam)	\$50/\$150	\$50/\$150	\$50/\$150	\$100/\$300
Preventive	100/100	100/100	100/100	100/10
Basic	80/80	80/80	100/100	100/10
Major	50/50	50/50	100/100	100/10
UCR	Maximum Allowable Charge*	90th UCR	Maximum Allowable Charge*	Maximum Allowable Charge*
Ortho (optional)	50% to \$1000	50% to \$1000	50% to \$1000	50% to \$1000
Tier Rates by Annual Maximums (without Orthodontia)				
Annual Maximums	\$1,000	\$1,500	\$2,000	\$1,000
Employee	\$23.57	\$25.27	\$26.01	\$23.57
Employee/ Spouse	\$48.22	\$51.70	\$53.22	\$48.22
Employee/Child(ren)	\$55.56	\$59.57	\$61.33	\$55.56
Family	\$80.20	\$85.98	\$88.51	\$80.20
Tier Rates by Annual Maximums (with Orthodontia)				
Employee	\$23.57	\$25.27	\$26.01	\$23.57
Employee/ Spouse	\$48.22	\$51.70	\$53.22	\$48.22
Employee/Child(ren)	\$60.75	\$64.76	\$66.52	\$60.75
Family	\$86.67	\$92.45	\$94.98	\$86.67
Plan Options				
Endo/Perio to Basic	1.04	1.04	N/A	N/A

***Maximum Allowable Charge (MAC):** For covered services provided by Out-of-Network Providers, Nippon Life Benefits will reimburse based on policy provisions up to the maximum allowable charge (MAC). Out-of-Network Providers may bill insureds for amounts in excess of the amount reimbursed by Nippon Life Benefits. Selecting an In-Network Provider ensures the lowest out-of-pocket costs.

DENTAL RATE CARD UNDERWRITING ASSUMPTIONS

- Includes Aetna Dental® Administrators Network
- Contributory plans require at least 50% employer contribution
- Dependents are covered to age 26
- Orthodontia is available for 5+ enrolled lives and limited to children under 19
- If there is an average of more than 3 children per EC (Employee + Child(ren)) and FF (Family) units, please contact your Nippon Life Benefits Sales Rep for a formal proposal.

- Deductible applies to basic and major services only
- Rate guaranteed for 12 months
- Includes Implants
- Includes Rollover
- Includes Open Enrollment

- **GROUPS WITHOUT PRIOR COVERAGE**
- Load 10% to the rate

QUESTIONS?

Contact your Nippon Life Benefits Sales Representative **TODAY!**
 Visit our website for more information:
www.nipponlifebenefits.com

DENTAL RATE CARD – Groups 10-50 enrolled

NIPPON LIFE BENEFITS:

DELIVERING INNOVATIVE EMPLOYEE BENEFITS FOR MORE THAN 25 YEARS. Nippon Life Benefits is proud to serve clients in the 2+ life marketplace and provide a full suite of benefit options: Dental, Vision, Life, and Disability.

Our strength and stability is proven with an **AM Best rating of A- (January 2017)**. We are a subsidiary of Nippon Life Insurance Company in Japan, the largest Life Insurer in Japan with over **\$520 billion in assets** and is ranked **#126 in the Global Fortune 500** (August 2018). Our foundational values are built with Harmony, Honor, and Humanity and are integrated into everything we do.

Calculation Worksheet

	Tier Rate	SIC Factor	Perio/Endo Factor	Participation Factor	Total Rate	# Enrolled	Monthly Total
Example	\$30	x 1.075	x 1.03	x 1.102	x \$36.61	x 5	= \$183.05
EE	x	x	x	x	x	x	=
ES	x	x	x	x	x	x	=
EC	x	x	x	x	x	x	=
EF	x	x	x	x	x	x	=
						TOTAL	

SIC	SIC Description	Factor
43xx	US Postal Service	1.075
58xx	Restaurants	1.075
63xx, 64xx	Insurance Carriers and Agencies	1.075
66xx, 67xx	Investments and Banking	1.075
70xx	Hotels and Motels	1.075
72xx	Laundry, Photo Studios, Beauty Shops, Shoe Repair, Funeral Services, Tax Returns	1.075
95xx, 96xx	Financial Services	1.075
55xx	Automobile Sales and Service	1.08
48xx	Communications	1.1
83xx, 84xx	Social Services Museums, Art Galleries	1.1
87xx	Accounting, Publications, Engineering, Architecture, Research and Development	1.1
92xx	Police, Public Protection, Fire	1.1
93xx, 94xx	Taxation, Finance, Economic Programs	1.1
65xx	Real Estate	1.13
78xx, 79xx	Motion Pictures Entertainers, Amusements, Recreation, Sports Teams	1.13
81xx, 82xx	Legal Services Education	1.13
91xx	Executive and Legislation	1.13
	All Other	1.0

Participation	Factor
100%	0.954
65% - 99%	1.000
60% - 64%	1.102
50% - 59%	1.157
45% - 49%	1.157
25% - 44%	1.227

TO CALCULATE YOUR MONTHLY RATE

- Using your business zip code, confirm the correct **Rating Area** is being used.
- After you have chosen your plan, write **Tier Rates** (EE, ES, EC and FF) into column 1.
- Using our **SIC Code List** (nature of business), insert **SIC Factor** in column 2.
- To modify Plan Options:
 - Insert Perio/Endo Factor in column 3
 - Insert Participation Factor in column 4
 - Use 1.0 as default factor in column 3 if not modifying **Plan Options**
- Based on census, complete **# Enrolled** column and calculate the **Monthly Total**.

NOTE: Groups without prior coverage, load 10% to the rate.

Dental Policy Series NP700 – 1 (J), et al, and Booklet Certificate Series NBD100-1 (J), et al is underwritten by Nippon Life Insurance Company of America® - marketing name Nippon Life Benefits®, NAIC number 81264, licensed & authorized in all states plus DC, except not ME, NH or WY, domiciled in Iowa, with a principal place of business at 655 Third Avenue, 16th floor, NY, NY 10017-9113, member company of Nippon Life Insurance Company of Japan (“Nissay”). Nippon Life Benefits is responsible for its own financial condition and contractual obligations. Nothing herein is a guarantee of benefits or eligibility. All terms, provisions, conditions, limitations and exclusions shown in your Nippon Life Insurance Company of America certificate booklet and master policy will govern. These product features are subject to change by us without notice, and may vary by state and/or market-segment. Additional underwriting rules and/or policies may also apply.

DENTAL RATE CARD – Groups 10-50 enrolled

New Jersey - Rate Area 2

Zips: 070 (EXCLUDING ZIP 07024), 072, 076, 077, 085, 087, 088, 089
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Ortho (optional)	50% to \$1000	50% to \$1000	50% to \$1000	50% to \$1000
Tier Rates by Annual Maximums (without Orthodontia)				
Annual Maximums	\$1,000	\$1,500	\$2,000	\$1,000
Employee	\$25.24	\$27.07	\$27.86	\$25.24
Employee/ Spouse	\$51.65	\$55.38	\$57.01	\$51.65
Employee/Child(ren)	\$59.52	\$63.82	\$65.69	\$59.52
Family	\$85.91	\$92.11	\$94.82	\$85.91
Tier Rates by Annual Maximums (with Orthodontia)				
Employee	\$25.24	\$27.07	\$27.86	\$25.24
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