



## INDIVIDUAL COVERAGE POLICIES

### Benefit Disclosures

Accident, Vision, or Dental individual coverage may not be available in all states. These individual policies have exclusions and limitations and provisions regarding termination of coverage. Rates will vary by plan design.

Plan documents are the final arbiter of coverage. (For residents of South Dakota: Plan documents govern coverage.)

[Dental](#)  
[Accident](#)  
[Vision](#)

Guardian products are those identified as having been issued or underwritten by The Guardian Life Insurance Company of America® (Guardian) or a named Guardian owned subsidiary. Products or services advertised or offered by non-Guardian companies on Guardian's website(s) are subject to each company's participation requirements which Guardian does not control. Individual Vision insurance is provided by Vision Service Plan Insurance Company (VSP).

### **Authorized Selling Agent Directly to Individuals: DTC GLIC, LLC., (d/b/a DTC GLIC Insurance Sales, LLC in California). FL License L104361**

DTC GLIC, LLC., (d/b/a DTC GLIC Insurance Sales, LLC in California) ("DTC GLIC, LLC") is the agent for The Guardian Life Insurance Company of America and its subsidiaries ("Guardian") for all individual products underwritten and issued by Guardian and certain third-party insurers through guardianlife.com. DTC GLIC, LLC is a wholly owned subsidiary of The Guardian Life Insurance Company of America and is a licensed agent for life, accident and health insurance products.

## **Dental**

Individual dental insurance products are underwritten by The Guardian Life Insurance Company of America, New York, New York or by one of its wholly owned subsidiaries and sold directly to individuals by DTC GLIC, LLC. Products are not available in all states. Policy limitations and exclusions apply. The actual limitations and exclusions that apply to your Dental Plan are governed by the policy forms approved for use in your state.

This plan provides dental insurance only. Coverage is limited to services necessary to prevent, diagnose, or treat dental disease, defect, or injury. Deductibles and plan limitations apply. Limitations and exclusions may include alternate treatment provisions, a missing tooth exclusion, and exclusions for cosmetic services, oral hygiene or plaque control services, experimental treatment, work related injuries, and certain appliances, prosthetics, or replacements (including lost or stolen items). Plan documents and certificates are the final authority for coverage and benefits. For full details on the limitations and exclusions that apply to your coverage, please review your plan document. (For residents of South Dakota: Plan documents govern coverage.)

Rates are guaranteed for one year for the plan of benefits initially selected. Policies renew annually.

### **IMPORTANT INFORMATION ABOUT GUARDIAN'S *DENTALGUARD INDEMNITY* AND GUARDIAN ADVANTAGE PPO PLANS**

Dental PPO plans provide in-network and out-of-network benefits. Use of an in-network provider may result in reduced out-of-pocket costs.

Coverage is limited to those charges that are necessary to prevent, diagnose or treat dental disease, defect, or injury. Deductibles apply. Waiting periods may also apply for some services.

Unless specified in the policy, individual dental plans do not pay for: oral hygiene services (except as covered under preventive services), orthodontia (unless expressly provided for), cosmetic or experimental treatments, any treatment to the extent benefits are payable by any other payor or for which no charge is made, prosthetic devices unless certain conditions are met, and services ancillary to surgical treatment.

Individual dental plans limit benefits for diagnostic consultations and for preventive, restorative, endodontic, periodontic and prosthodontic services.

### **IMPORTANT INFORMATION ABOUT TEETH WHITENING BENEFITS:**

Teeth whitening benefits may be considered taxable income. Furthermore, the IRS considers teeth whitening to be a cosmetic procedure, such that out-of-pocket costs for teeth whitening are not medical care expenses for tax purposes. Guardian does not provide tax or legal advice. Please consult your personal tax or legal advisor for more information on the tax consequences of teeth whitening coverage.

**Information on the approved state and product specific online enrollment form numbers can be viewed here: [Online Enrollment Form Numbers](#)**

### **Products Underwritten by Guardian Life Insurance Company of America**

#### ***DENTAL PPO PLANS***

Policy Form IP-DEN-16; IP-DEN-20; IP-DEN-25 et. al.

#### ***DENTAL HMO PLANS***FLORIDA

Policy Form IP-1-MDG-DHMO-FL-OFF-26

### **Products Underwritten by Managed Dental Guard, Inc.**

#### ***DENTAL HMO PLANS***

TEXAS

Policy: IP-1-MDG-DHMO-TX-24

### **Products Underwritten by First Commonwealth Inc. through its Illinois subsidiaries\***

#### ***DENTAL HMO PLANS***

ILLINOIS

Policy: IP-FCW-DHMO-IL-24

*\*First Commonwealth Insurance Company — (IL), First Commonwealth Limited Health Services Corporation — (IL), First Commonwealth of Illinois, Inc.*

## **Accident**

Individual accident insurance products are underwritten by The Guardian Life Insurance Company of America, New York, New York and sold directly to individuals by DTC GLIC, LLC. Products are not available in all states. Policy limitations and exclusions apply. The actual limitations and exclusions that apply to your Accident Plan are governed by the policy forms approved for use in your state. Please refer to your plan documents for a complete list of limitations and exclusions. Plan documents are the final arbiter of coverage. This policy provides limited benefits only.

This is a limited plan of supplemental health insurance that provides specified financial support, as a lump sum or indemnity benefit, for insured injury from a covered accident. This is not hospital or major medical expense insurance, or minimum essential coverage defined by federal law. This coverage does not reimburse for hospital or medical expenses and will not pay benefits for any injury caused by sickness, disease, mental infirmity, or medical or surgical treatment. Limitations and exclusions may include an accident that occurred before the covered person is covered by this plan, and injuries to a dependent child during birth. Plan documents and certificates are the final authority for coverage and benefits. For full details on the limitations and exclusions that apply to your coverage, please review your plan document.

Rates are guaranteed for one year for the plan of benefits initially selected. Policies renew annually up to age 75.

Accident Individual Policy Form IP- Accident: IP-ACC-16; IP-ACC-19; IP-ACC-21; IP-ACC-24 et. al.

**Information on the approved state and product specific online enrollment form numbers can be viewed here:**  
[\*\*Online Enrollment Form Numbers\*\*](#)

## **Vision**

Individual Vision insurance is provided by Vision Service Plan Insurance Company (VSP) and billing and premium collection services for such vision insurance are conducted by DTC GLIC, LLC (d/b/a DTC GLIC Insurance Sales, LLC in California) ("DTC GLIC, LLC"). DTC GLIC, LLC is a wholly owned subsidiary of The Guardian Life Insurance Company of America ("Guardian").

Guardian and DTC GLIC, LLC are not affiliated with VSP and Guardian and DTC GLIC, LLC do not assume any responsibility or liability for non-Guardian products or services, including those offered by VSP.

TruHearing's digital hearing aid discount plan is available only to customers who purchase a VSP vision product and is not insurance. TruHearing is an independent third party not affiliated with Guardian. The discounts for hearing aids are available only from participating TruHearing providers and will vary depending on the provider or service received. TruHearing does not make payments to providers for the services received under the discount plan. You are obligated to pay for all medical or ancillary services but will receive a discount from those TruHearing providers that have contracted with TruHearing. Not available in WA, UT, MD or CA. To obtain additional information go to [TruHearing.com](https://TruHearing.com) or call 1-800-334-1807.

This plan provides vision insurance only. Coverage is limited to those charges that are necessary to prevent, diagnose and treat a vision condition. Copayments, plan allowances, and plan limitations apply. Limitations and exclusions may include medical or surgical treatment of the eye, supplemental vision testing, services, or corrective eyewear required by the employer as a condition of employment, or replacement of lenses or frames that are lost or stolen. Plan documents and certificates are the final authority for coverage and benefits. For full details on the limitations and exclusions that apply to your coverage, please review your plan document.

<b>State</b>	<b>Dental PPO EAPP Form #</b>	<b>Accident EAPP Form #</b>
Alabama	IP-EAPP-26	IP-EAPP-26
Alaska	<i>Product Not Available</i>	IP-EAPP-26-AK
Arizona	IP-EAPP-26	IP-EAPP-26
Arkansas	IP-EAPP-26	IP-EAPP-26
California	IP-EAPP-26	IP-EAPP-26
Colorado	IP-EAPP-26-CO	IP-EAPP-26-CO
Connecticut	IP-EAPP-26	IP-EAPP-26
Delaware	IP-EAPP-26	IP-EAPP-26
District of Columbia	IP-EAPP-26	IP-EAPP-26
Florida	IP-EAPP-26-FL	IP-EAPP-26-FL
Georgia	IP-EAPP-26	IP-EAPP-26
Hawaii	IP-EAPP-26	IP-EAPP-26
Idaho	IP-EAPP-26	<i>Product Not Available</i>
Illinois	IP-EAPP-26-IL	IP-EAPP-26-IL
Indiana	IP-EAPP-26	IP-EAPP-26
Iowa	IP-EAPP-26	IP-EAPP-26
Kansas	IP-EAPP-26-KS	IP-EAPP-26-KS
Kentucky	IP-EAPP-26	IP-EAPP-26
Louisiana	IP-EAPP-26-LA	IP-EAPP-26-LA
Maine	IP-EAPP-26	IP-EAPP-26
Maryland	IP-EAPP-26	IP-EAPP-26
Massachusetts	<i>Product not Available</i>	<i>Product Not Available</i>
Michigan	IP-EAPP-26	IP-EAPP-26
Minnesota	IP-EAPP-26-MN	IP-EAPP-26-MN
Mississippi	IP-EAPP-26	IP-EAPP-26
Missouri	IP-EAPP-26	IP-EAPP-26
Montana	<i>Product Not Available</i>	IP-EAPP-26
Nebraska	IP-EAPP-26	IP-EAPP-26
Nevada	IP-EAPP-26	IP-EAPP-26
New Hampshire	IP-EAPP-26	<i>Product Not Available</i>
New Jersey	IP-EAPP-26	IP-EAPP-26
New Mexico	<i>Product Not Available</i>	<i>Product Not Available</i>
New York	IP-EAPP-26	<i>Product Not Available</i>
North Carolina	IP-EAPP-26	IP-EAPP-26
North Dakota	IP-EAPP-26	IP-EAPP-26
Ohio	IP-EAPP-26	IP-EAPP-26
Oklahoma	IP-EAPP-26	IP-EAPP-26
Oregon	IP-EAPP-26	IP-EAPP-26
Pennsylvania	IP-EAPP-26	<i>Product Not Available</i>
Rhode Island	IP-EAPP-26	IP-EAPP-26
South Carolina	IP-EAPP-26	IP-EAPP-26
South Dakota	<i>Product Not Available</i>	IP-EAPP-26
Tennessee	IP-EAPP-26	IP-EAPP-26
Texas	IP-EAPP-26	IP-EAPP-26
Utah	IP-EAPP-26	IP-EAPP-26
Vermont	IP-EAPP-26	IP-EAPP-26
Virginia	<i>Product Not Available</i>	<i>Product Not Available</i>
Washington	IP-EAPP-26-WA	IP-EAPP-26-WA
West Virginia	IP-EAPP-26	IP-EAPP-26
Wisconsin	IP-EAPP-26	IP-EAPP-26
Wyoming	<i>Product Not Available</i>	IP-EAPP-26

EAPP Form # reflects most recently approved form.  
Product Not Available: Not actively marketed.