

DENTAL

Make your life easier by using our Benefit and Eligibility Fax

We're pleased to share that the **Benefit and Eligibility Fax** is available by calling our toll-free number 800-442-7742.

- There's no waiting on hold with the Benefit and Eligibility Fax — You can access it on your own time and on your own terms.
- Dental benefits and eligibility information are available to you immediately — 24 hours a day, 7 days a week.
- Consistent information that you can count on.

Our Benefit and Eligibility Fax will be sent directly to you, providing detailed plan and benefit information. For example, benefit information is broken down by procedure codes for services such as extractions, crowns and major services. Also, eligibility and last date of service for routine procedures are available.

Benefit and Eligibility Fax — It's quick, smart and convenient.

Try it today! Call 800-442-7742.

If you have any questions about this tool, please call Provider Services at 800-434-2638.

Sample of a Benefit and Eligibility Fax



Date: 01/01/2022

Member name: John Doe
 Group name: ABC Company
 Group number: 9999999

Payor address: PO Box 2940
 Clinton, IA 52733
 Payor ID: 70408

Coverage: Full Family

Name	Year of Birth	Relation	Original Effective Date	Plan Effective Date
John Doe	1970	Self	01/01/2022	01/01/2022
Scott Doe	2002	Child	01/01/2022	01/01/2022
Jane Doe	1976	Spouse	01/01/2022	01/01/2022
Mary Doe	2004	Child	01/01/2022	01/01/2022

Dependent Age limit: Coverage to age 26

Age limitation could vary. Please refer to your benefit booklet.

Persons will be covered under the pediatric plan through the end of the day on their birthday

The information provided is not a guarantee of coverage. The terms of the applicable policy or plan control. The information provided does not reflect services which may have been performed, but for which a claim has not yet been processed, and is therefore subject to change without notice. In addition, some services are subject to review. Please refer to www.sunlife.com/account for a complete list of procedures and required diagnostics. For the exact amount to be covered, we recommend that a dental treatment plan be submitted to us for review before treatment begins.

If you have any questions concerning dental benefits, please call customer service at 800.442.7742. For more self-service options please visit our website at www.sunlife.com/account.

Plan Maximums and Deductibles for John Doe as of 01/01/2022

Benefits year: 01/01/2022 to 12/31/2022

Network: Sun Life Dental Network

Annual Maximum	In Network		Out of Network	
	Maximum	Maximum Remaining	Maximum	Maximum Remaining
John Doe	\$1,500.00	\$1,500.00	\$1,000.00	\$1,000.00
Scott Doe	\$1,500.00	\$1,500.00	\$1,000.00	\$1,000.00
Jane Doe	\$1,500.00	\$1,500.00	\$1,000.00	\$1,000.00
Mary Doe	\$1,500.00	\$1,500.00	\$1,000.00	\$1,000.00

Pediatric Individual Out of Pocket

John Doe	\$2.00	\$3.00	\$1.00	\$4.00
Scott Doe	\$2.00	\$3.00	\$1.00	\$4.00
Jane Doe	\$2.00	\$3.00	\$1.00	\$4.00
Mary Doe	\$2.00	\$3.00	\$1.00	\$4.00

Network Deductible	Out of Network Deductible
\$1,000.00	\$1,000.00

Coinsurance, wait periods, and frequencies for John Doe as of 01/01/2022

NOTE: Information provided, unless specifically stated, is for Primary Subscriber only. For complete dependent information, please go to www.sunlife.com/account.

Exams

Code	Percentage	Maximum	Original Effective Date	Frequency	Waived	Waived
D0120	100%	100%	01/01/2022	1 in a 6 month period	Waived	Waived
D0140	100%	100%	01/01/2022	1 in a 6 month period	Waived	Waived
D0150	100%	100%	01/01/2022	1 in a 6 month period	Waived	Waived
D3348	90%	80%	01/01/2022	1 in a 24 month period	Annual	Annual
D4341	90%	80%	01/01/2022	1 in a 24 month period	Annual	Annual

x-Rays

Code	Percentage	Maximum	Original Effective Date	Frequency	Waived	Waived
D0210	100%	100%	01/01/2022	1 in a 60 month period	Waived	Waived
D0220	100%	100%	01/01/2022	4 in a 12 month period	Waived	Waived
D0230	100%	100%	01/01/2022	4 in a 12 month period	Waived	Waived
D0272	100%	100%	01/01/2022	1 in a 12 month period	Waived	Waived
D0274	100%	100%	01/01/2022	1 in a 12 month period	Waived	Waived
D0330	100%	100%	01/01/2022	1 in a 60 month period	Waived	Waived

Cleanings

D1110 ¹	100%	100%	01/01/2022	1 in a 6 month period	Waived	Waived
D1120 ¹	100%	100%	01/01/2022	1 in a 6 month period	Waived	Waived

Fluoride: Coverage to age 99

D1206	100%	100%	01/01/2022	1 in a 6 month period	Waived	Waived
D1208	100%	100%	01/01/2022	1 in a 6 month period	Waived	Waived

Sealants: NOT COVERED

	0%	0%	N/A	N/A	Waived	Waived
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Space Maintainers: NOT COVERED

	0%	0%	N/A	N/A	Waived	Waived
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Group insurance policies are underwritten by Sun Life Assurance Company of Canada (Wellesley Hills, MA) in all states, except New York. In New York, group insurance policies are underwritten by Sun Life and Health Insurance Company (U.S.) (Lansing, MI).

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