

I am pleased to announce the following efforts for our dental and vision products in response to the impacts of COVID-19.

What is being put in place:

For the Employer:

- **Providing rate holds for all renewals from July – December 31st.**
 - This applies to both dental and vision.
 - We have already provided rate holds for < 500 life groups May – July.
 - We are expanding this to include ALL size groups July – December.
 - Standard will revisit extending into 2021 as we get closer to it.

For the Member:

- **Waiving the deductible for members July – December 31st 2020.**
 - We will waive the deductible for all dental claims incurred July 1 through December 31, 2020. The deductible waiver does not apply to orthodontia claims.
- **Removing frequency limitation for cleanings July – December 31st 2020.**
- **Removing frequency limitation for exams/checkups July – December 31st 2020.**



The Standard announces additional Dental and Vision benefit enhancements for all groups

May 26, 2020

Our goal is to help our customers maintain benefit coverage and good health during the pandemic. We have previously announced extended premium grace periods for all our customers and elimination of renewal rate increases for many groups. As the crisis continues, we will continue to respond as needs evolve. Following are the most recent updates for The Standard's COVID-19 response regarding our Dental and Vision offering:

- On March 23, we announced a hold on renewal rates on all Dental and Vision groups up to 500 employees with renewal dates of May, June and July. We have extended that hold for **all Dental and Vision groups** with renewal dates July through December 2020. All group renewals will go through their initial review and be sent out as a rate pass.
- We are waiving the deductible for all Dental claims incurred July 1 through December 31, 2020. The deductible waiver does not apply to orthodontia claims.
- We have removed the frequency limitation for Dental exams and cleanings from July 1 through December 31, 2020.

The deductible and frequency benefit enhancements apply to all group policyholders. Please note that ASO/self-funded groups must opt in for these options and understand they are financially responsible for the claims considered.

Our focus is on encouraging members to seek care, use their benefits and maintain good health. The measures we're implementing take into account our policyholders' and members' financial and physical well-being as well as the viability of your business and our dentists' practices. We have made these decisions carefully for the benefit of everyone with whom we do business.

If you have questions or would like additional information, please contact your sales representative.