



DentalWise Max™

Product comparison



DentalWise Max: new DVH coverage, backed by UnitedHealthcare brand

New DentalWise Max product is designed to combine dental, vision, and hearing benefits into one, easy-to-use plan, with the added strength of the UnitedHealthcare brand and dental/vision networks.

Rich and relevant plan design

The plans feature benefits for dental, vision, and hearing in one package to make it easy for your customers. Benefit levels are increased and uncomplicated. See the comparison on the following pages for more details.

- Most benefits available right away
- Vision and hearing benefits included at all plan levels
- UnitedHealthcare dental and vision networks

Highlights of enhancements

DentalWise Max features several improvements over the previous DVH product:

- Increased maximum dental benefit levels, with Day 1 coverage for nearly all services
- Implants are now covered on some plans (after waiting period and limited to certain benefit amounts)
- Lower copay amounts for lenses (glasses and contacts) in-network
- Vision benefits are now accessible out of network
- Simplified hearing aid benefit structure, including access to over-the-counter (OTC) hearing aids

UnitedHealthcare brand

Best of all, DentalWise Max features the UnitedHealthcare brand, well-recognized by your customers, better positioning this product among competitors.

- The Chesapeake Life Insurance Company is a UnitedHealthcare company
- Soon all Chesapeake products will transition to the UnitedHealthcare brand
- Your customers will be supported by this brand post-sale too, with access to the UHC Member Hub (uhcmemberhub.com) for management of their plan(s).



Dental benefit¹ comparison

Enjoy access to the UHC dental network with increased benefit levels and decreased waiting periods.

	DentalWise Plus	Prime DVH	DentalWise Max	
Network	Careington Maximum Care Network		UHC Dental PPO 30 Network	
OON	U&C		Primarily MAC U&C Framework in limited geographic areas	
Annual Deductible	\$100 (Per Person Per Policy Year) Only applicable for Basic and Major Dental Services		\$100 (Per Person Per Policy Year) Only applicable for Basic and Major Dental Services	
Max Annual Benefit Level	\$1,000, \$1,500, or \$2,000 ²		\$1,000, \$2,000, or \$3,000	
Waiting Periods	Yes (waived with proof of prior coverage for some plans)		No waiting periods (except for implants)	
Preventive	100% in all years		100% in all years	
Basic Services	60% Year 1 (6-month waiting period) ³ 70% Year 2 80% Years 3+	60% Year 1 70% Year 2 80% Years 3+	60% Year 1 (day 1 coverage)	80% Years 2+
Major Services	50% Year 1 (12-month waiting period) ³ 70% Year 2 80% Years 3+	60% Year 1 (9-month waiting period) 70% Year 2 80% Years 3+	15% Year 1 (day 1 coverage)	50% Years 2+
Major - Implants	Not Available		Applicable only for the \$2k & \$3k levels 50% with \$1,500 max ⁴ Subject to 12 month waiting period	

1 Benefits are limited to a certain number of occurrences per person, per Policy Year or Lifetime and may vary by state. See brochure for details.

2 This is a policy level maximum that includes Dental, Vision, and Hearing benefits.

3 Waiting periods are waived with acceptable proof of previous dental insurance for a period of 12 consecutive months prior to issue date of new coverage.

4 Implant Max is separate from and not subject to the Max Annual Benefit Level. Implant coverage may be restricted or limited to certain ages in some states.



Vision and hearing benefit¹ comparison

Robust DentalWise Max plan includes in-network and out-of-network vision benefits and access to over-the-counter hearing aids

	DentalWise Plus ²	Prime DVH ²	DentalWise Max ³	
Vision	Network	EyeMed Vision Care's "Select" Network	None	UHC Vision (Spectera, Inc. Network)
	Eye Exam	100% up to \$75 (no deductible)	100% up to \$200 (no deductible)	In-network - 100% Out-of-network - \$50 allowance
	Lenses	\$20 Copay, 100% up to \$200	Year 1: 60% (9-month waiting period) Year 2: 70% Years 3+: 80%	In-network \$10 Copay, then 100% Out-of-network Single Vision: \$40 allowance Bifocal-lined: \$60 allowance Trifocal-lined: \$80 allowance
	Frames	\$20 Copay, 100% up to \$200	Year 1: 60% (9-month waiting period) Year 2: 70% Years 3+: 80%	In-network \$150 allowance Out-of-network \$75 allowance
	Contact Lenses	\$20 Copay, 100% up to \$200	Year 1: 60% (9-month waiting period) Year 2: 70% Years 3+: 80%	In-network \$10 Copay, then \$150 allowance Out-of-network \$105 allowance
Hearing ⁴	Network	TruHearing		UHC Hearing Network
	Hearing Exam	100% up to \$75 (may vary in some states)		100%
	Hearing Aid(s)	Year 1: \$200 Year 2: \$400 ⁵ Year 3+: \$600 ⁵	Year 1: 60% (9-month waiting period) Year 2: 70% Year 3+: 80% (((\$500 max every 2 years) ⁶)	Fitting evaluation for a hearing aid(s) once every 2 years; OTC hearing aids included \$750

1 Benefits are limited to a certain number of occurrences per person, per Policy Year or Lifetime and may vary by state. See brochure for details.

2. Vision and Hearing benefits on DentalWise Plus and Prime DVH are subject to Annual Deductible and Max Annual Benefit Level, unless otherwise noted.

3 Vision and Hearing benefits on DentalWise Max are payable once per insured per policy year, unless otherwise noted, and not subject to Annual Deductible or Max Annual Benefit Level.

4 Hearing benefits are not available in some states.

5 Benefit increases each year it goes unused. If used, it starts back at \$200 for that insured person.

6. Subject to Max Annual Benefit Level; includes hearing aid repairs

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