



# COMMONWEALTH OF MASSACHUSETTS

## Office of Consumer Affairs and Business Regulation

### DIVISION OF INSURANCE

1000 Washington Street, Suite 810 • Boston, MA 02118-6200

(617) 521-7794 Toll-free (877) 563-4467

<http://www.mass.gov/doi>

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COMMISSIONER OF INSURANCE

## INDIVIDUAL DENTAL EXPENSE INSURANCE POLICIES THAT MEET THE REQUIREMENTS OF MASSACHUSETTS' REGULATION 211 CMR 42.00

### Company Name

### Approval Date

#### 1. **ALTUS DENTAL INSURANCE COMPANY, INC.**

10 Charles Street  
Providence, R.I. 02904-2208  
(877) 223-0588

#### *Policy #s:*

|                 |                         |          |
|-----------------|-------------------------|----------|
| AD100-IND (MA)  | dental insurance policy | 12/02/11 |
| AD200-INDX (MA) | dental insurance policy | 01/01/14 |

#### 2. **AMERICAN FAMILY LIFE ASSURANCE COMPANY OF COLUMBUS**

1932 Wynnton Road  
Columbus, GA 31999-0001  
(800) 992-3522

#### *Policy #s:*

|            |                         |          |
|------------|-------------------------|----------|
| A-81100-MA | dental insurance policy | 08/20/04 |
| A-81200-MA | dental insurance policy | 08/20/04 |
| A-81300-MA | dental insurance policy | 08/20/04 |
| A-81400-MA | dental insurance policy | 08/20/04 |
| A82100RMA  | dental insurance policy | 04/05/12 |
| A82200RMA  | dental insurance policy | 04/05/12 |
| A82300RMA  | dental insurance policy | 04/05/12 |
| A82400RMA  | dental insurance policy | 04/05/12 |

#### 3. **AMERICAN PROGRESSIVE LIFE & HEALTH COMPANY OF NEW YORK**

P. O. Box 13547  
Pensacola, FL 32591-3547  
(800) 645-4116

#### *Policy #s:*

|                          |                         |          |
|--------------------------|-------------------------|----------|
| PRDEN 03 MA <sup>1</sup> | dental insurance policy | 04/08/05 |
|--------------------------|-------------------------|----------|

<sup>1</sup> Plan enrollment limited to individuals age 65 or older.

## INDIVIDUAL DENTAL EXPENSE INSURANCE POLICIES

|    | <u>Company Name</u>   | <u>Approval Date</u> |
|----|---|----------------------|
| 4. | <b>BLUE CROSS AND BLUE SHIELD OF MASSACHUSETTS, INC.</b><br>401 Park Drive, Landmark Center<br>Boston, MA 02215<br>(800) 422-3545<br><br><i>Policy #s:</i><br>DENT SR (1-1-2012) <sup>2</sup> dental insurance policy   | 09/02/11             |
| 5. | <b>(The) Chesapeake Life Insurance Company</b><br>9151 Grapevine Highway<br>North Richland Hills, TX 76180<br>800-733-1110<br><br><i>Policy #s:</i><br>CH-26121-IP (01/12) MA (07/17) Dental  | 05/15                |
| 6. | <b>CIGNA HEALTH AND LIFE INSURANCE COMPANY</b><br>900 Cottage Grove Road<br>Bloomfield, CT 06002<br>(860) 226-6000<br><br><i>Policy #s:</i><br>HC-NOT11 et. Al/HC-CER33              dental insurance policy  | 10/09/13             |
| 7. | <b>COLONIAL LIFE &amp; ACCIDENT INSURANCE COMPANY</b><br>1200 Colonial Life Boulevard<br>Columbia, SC 29202<br>803-798-7000<br><br><i>Policy #s:</i><br>Dental-MA                                      dental insurance policy  | 05/13/15             |
| 8. | <b>DENTAL SERVICE OF MASSACHUSETTS, INC.</b><br>(d/b/a Delta Dental of Massachusetts)<br>465 Medford Street<br>Boston, MA 02129-1454<br>800-872-0500<br><br><i>Policy #s:</i><br>DDP-PPA6 06/12/2014                      dental insurance policy<br>DDP-PPA5 06/12/14                      dental insurance policy | 08/23/13<br>08/23/13 |

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<sup>2</sup> Plan enrollment limited to individuals age 65 or older.

## INDIVIDUAL DENTAL EXPENSE INSURANCE POLICIES

### Company Name

### Approval Date

#### 9. DENTEGRA INSURANCE COMPANY

100 First Street  
San Francisco, CA 94105  
(800) 521-2651

*Policy #s:*

|               |                         |          |
|---------------|-------------------------|----------|
| I-SLE-C-MA-09 | dental insurance policy | 03/22/12 |
| I-PPO-C-MA-12 | dental insurance policy | 07/24/12 |

#### 10. DSM MASSACHUSETTS INSURANCE COMPANY, INC.

465 Medford Street  
Boston, MA 02129-1454  
(800) 872-0500

*Policy #s:*

|  |                         |          |
|--|-------------------------|----------|
| DDEPO.SubcInd.05-15 <sup>3</sup>                     | dental insurance policy | 09/27/13 |
| DSM.MA.DeltaCare.Ind.<br>Sub.Cert.01.15 <sup>4</sup> | dental insurance policy | 08/20/15 |

#### 11. (THE) GUARDIAN LIFE INSURANCE COMPANY OF AMERICA

7 Hanover Square  
New York, New York 10004  
(888) 600-1600

*Policy #s:*

|              |                         |          |
|--------------|-------------------------|----------|
| IP-DEN-12-MA | dental insurance policy | 11/02/12 |
|--------------|-------------------------|----------|

#### 12. INDEPENDENCE AMERICAN INSURANCE COMPANY

485 Madison Avenue  
New York, NY 10022  
(212) 355-4141

*Policy #s:*

|                           |                         |          |
|---------------------------|-------------------------|----------|
| IAIC IDEN POL IND MA 0414 | dental insurance policy | 01/26/17 |
|---------------------------|-------------------------|----------|

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<sup>3</sup> This form number replaces the previously filed form number DDEPO.SubcInd.01-13. Includes the following options: Delta Dental EPO Pediatric; Delta Dental EPO Family Enhanced; Delta Dental EPO Family Value; Delta Dental EPO Pediatric Basic; & Delta Dental EPO Family Basic Exclusive Network.

<sup>4</sup> The service area for this *contract* is Bristol, Essex, Middlesex, Norfolk, Plymouth and Suffolk counties. If a member resides outside of those counties, the member may experience somewhat longer travel times/distances in order to receive covered services from a DeltaCare dentist.

## INDIVIDUAL DENTAL EXPENSE INSURANCE POLICIES

### Company Name

### Approval Date

#### 13. **MADISON NATIONAL LIFE INSURANCE COMPANY, INC.**

1241 John Q Hammons Drive  
Madison, WI 53717  
(608) 830-2000

*Policy #s:*

|                          |                         |          |
|--------------------------|-------------------------|----------|
| MNL IDEN POL IND MA 0414 | dental insurance policy | 01/26/17 |
|--------------------------|-------------------------|----------|

#### 14. **METROPOLITAN LIFE INSURANCE COMPANY**

MetLife Dental Claims  
P.O. Box 981282  
El Paso, TX 79998-1282  
1-844-2METDEN (1-844-263-8336)  
[www.metlife.com/insurance/dental-insurance](http://www.metlife.com/insurance/dental-insurance)

*Policy #s:*

|                                  |                         |          |
|----------------------------------|-------------------------|----------|
| IND-DENTAL-2015                  | dental insurance policy | 01/17/17 |
| IND-DENTAL-2015-FSD <sup>5</sup> | dental insurance policy | 01/17/17 |

#### 15. **RENAISSANCE LIFE AND HEALTH INSURANCE COMPANY OF AMERICA**

P.O. Box 738  
Greenwood, IN 46142  
(888) 791-5995

*Policy #s:*

|                                    |                         |          |
|------------------------------------|-------------------------|----------|
| INVD-100A                          |                         |          |
| Indemnity (INVD-101A/AA)           | dental insurance policy | 10/02/08 |
| PPO (INVD-101/PPO)                 | dental insurance policy | 10/02/08 |
| Table of Allowance (INVD-101A/TOA) | dental insurance policy | 10/02/08 |

#### 16. **SECURITY LIFE INSURANCE COMPANY OF AMERICA <sup>6</sup>**

10901 Red Circle Drive  
Minnetonka, Minnesota 55343  
(800) 927-2730

*Policy #s:*

|   |                         |          |
|---|-------------------------|----------|
| PrimeStar Individual (IP1000-MA)                  | dental insurance policy | 08/26/14 |
| Options:  |                         |          |
| IPS1000-C-PPO-MA - Complete PPO 1000, 2000        |                         |          |
| IPS1000-AP-PPO-MA - Advantage Plus PPO 1000, 2000 |                         |          |
| IPS1000-A-MA - Advantage Indemnity 1000, 2000     |                         |          |
| IPS1000-E-MA - Essential Indemnity 500            |                         |          |
| IPS1000-V-MA - Optional Indemnity Vision Rider    |                         |          |

<sup>5</sup> Plan designed as a dental group conversion plan offered to former group plan enrollees who lose access to their group dental plan.

<sup>6</sup> Effective December 31, 2016, Security Life Insurance Company of America ("Security Life") merged into Ameritas Life Insurance Corp ("Ameritas"). Effective January 1, 2017, the Complete and Advantage Plus plans are no longer marketed in Massachusetts.

## INDIVIDUAL DENTAL EXPENSE INSURANCE POLICIES

### Company Name

### Approval Date

#### 17. STANDARD SECURITY LIFE INSURANCE COMPANY OF NEW YORK

485 Madison Avenue  
New York, NY 10022  
(212) 355-4141

*Policy #s:*

SSL IDEN POL IND MA 0414      dental insurance policy      01/26/17

#### 18. TIME INSURANCE COMPANY

501 East Michigan Avenue  
Milwaukee, WI 53201-0624  
(800) 800-1212

*Policy #s:*

8079.POL.MA      dental insurance policy      11/30/10

#### 19. UNITED CONCORDIA INSURANCE COMPANY <sup>7</sup>

Northwoods Crossing Office Park  
4401 Deer Path Road  
Harrisburg, PA 17110  
(866) 568-6099

*Policy #s:*

MAIN01-0312UCIC      dental insurance policy      12/28/10

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<sup>7</sup> Carrier notified the Division on June 6, 2014 that it intends to issue a 60 day advance notice to individual dental policyholders that their plans will be nonrenewed upon their next renewal date.