

PATIENTS BY INSURANCE COMPANY

Insurance Company Range: 1 - 21

Include User Code(s):

Exclude User Code(s): I

[1] Blue Cross & Blue Shield Of New Jersey

| ID | Patient Name | Guarantor Name | Plan Name [Plan ID] Group No. | Coverage | Ins Bal |
|------|---------------------|---------------------|--|--------------|---------|
| 102 | Ascott, Julie | Ascott, Sam | T-Rowe Price [1] 8800399 | Prim Dental | 0.00 |
| 104 | Ascott, Katie | Ascott, Sam | T-Rowe Price [1] 8800399 | Prim Dental | 156.00 |
| 103 | Ascott, Molly | Ascott, Sam | T-Rowe Price [1] 8800399 | Prim Dental | 172.00 |
| 101 | Ascott, Sam | Ascott, Sam | T-Rowe Price [1] 8800399 | Prim Dental | 0.00 |
| 601 | Davidson, Michael | Davidson, Michael | Blue Cross & Blue Shield [21] 798798 | Prim Medical | 0.00 |
| 801 | Frank, Helen | Frank, Helen | T-Rowe Price [1] 8800399 | Prim Dental | 327.50 |
| 3402 | Ingle, Catherine | Ingle, Chris | T-Rowe Price [1] 8800399 | Prim Dental | 0.00 |
| 3401 | Ingle, Chris | Ingle, Chris | T-Rowe Price [1] 8800399 | Prim Dental | 0.00 |
| 3403 | Ingle, Joseph | Ingle, Chris | T-Rowe Price [1] 8800399 | Prim Dental | 0.00 |
| 1502 | Nicholas, Elizabeth | Nicholas, Elizabeth | T-Rowe Price [1] 8800399 | Prim Dental | 0.00 |
| 1503 | Nicholas, Jason | Nicholas, Elizabeth | T-Rowe Price [1] 8800399 | Sec Dental | 0.00 |
| 1501 | Nicholas, Roger | Nicholas, Elizabeth | T-Rowe Price [1] 8800399 | Sec Dental | 0.00 |
| 3103 | Ortho, Amy | Ortho, Bonnie | T-Rowe Price [1] 8800399 | Sec Dental | 0.00 |
| 3102 | Ortho, Bonnie | Ortho, Bonnie | T-Rowe Price [1] 8800399 | Prim Dental | 0.00 |
| 3201 | Thomas, Daniel L. | Thomas, Daniel | T-Rowe Price [1] 8800399 | Prim Dental | 377.60 |
| 3202 | Thomas, Erica A. | Thomas, Daniel | T-Rowe Price [1] 8800399 | Prim Dental | 327.50 |
| 3203 | Thomas, Samantha | Thomas, Daniel | T-Rowe Price [1] 8800399 | Prim Dental | 974.00 |

This insurance company provides coverage for 17 patient(s).

[2] Aetna

| ID | Patient Name | Guarantor Name | Plan Name [Plan ID] Group No. | Coverage | Ins Bal |
|-----|-----------------|-----------------|-------------------------------------|-------------|---------|
| 201 | Arnold, Patrick | Arnold, Patrick | United Parcel Service [2] 29290 | Prim Dental | 327.50 |

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Include User Code(s):

Exclude User Code(s): I

[2] Aetna

| ID | Patient Name | Guarantor Name | Plan Name [Plan ID] Group No. | Coverage | Ins Bal |
|------|---------------------|-------------------|--|-------------|---------|
| 2203 | Brown, Jessica R. | Brown, Paul | Flannigan's Flat Fee Plan [2] | Prim Dental | 0.00 |
| 2201 | Brown, Paul T. | Brown, Paul | Flannigan's Flat Fee Plan [2] | Prim Dental | 0.00 |
| 501 | Carter, James | Carter, James | Baltimore City Police [4] 7897987 | Prim Dental | 40.50 |
| 1801 | Caulk, Justin | Caulk, Justin | United Parcel Service [2] 29290 | Prim Dental | 0.00 |
| 1802 | Caulk, Mary | Caulk, Justin | United Parcel Service [2] 29290 | Prim Dental | 0.00 |
| 1803 | Caulk, Tiffany | Caulk, Justin | United Parcel Service [2] 29290 | Prim Dental | 0.00 |
| 2402 | Ellis, Karen L. | Endo, Robert | United Parcel Service [2] 29290 | Sec Dental | 0.00 |
| 2401 | Endo, Robert M. | Endo, Robert | United Parcel Service [2] 29290 | Prim Dental | 0.00 |
| 901 | Faulkner, James | Faulkner, James | United Parcel Service [2] 29290 | Prim Dental | 0.00 |
| 1001 | Granger, Nicholas | Granger, Nicholas | Baltimore County Fire Fighters [5] 92900 | Prim Dental | 0.00 |
| 2601 | Jacobs, Calvin | Jacobs, Calvin | Baltimore City Police [4] 7897987 | Prim Dental | 0.00 |
| 2604 | Jacobs, Elizabeth | Jacobs, Calvin | Baltimore City Police [4] 7897987 | Prim Dental | 0.00 |
| 2602 | Jacobs, Mary | Jacobs, Calvin | Baltimore City Police [4] 7897987 | Sec Dental | 0.00 |
| 2603 | Jacobs, Michael | Jacobs, Calvin | Baltimore City Police [4] 7897987 | Prim Dental | 0.00 |
| 1301 | Lowry, James | Lowry, James | United Parcel Service [2] 29290 | Prim Dental | 307.50 |
| 1304 | Lowry, Jennifer | Lowry, James | United Parcel Service [2] 29290 | Prim Dental | 0.00 |
| 1302 | Lowry, Nicole | Lowry, James | United Parcel Service [2] 29290 | Prim Dental | 307.50 |
| 2801 | McKenzie, John | McKenzie, John | Baltimore City Police [4] 7897987 | Prim Dental | 0.00 |
| 1502 | Nicholas, Elizabeth | Nicholas, Roger | United Parcel Service [2] 29290 | Sec Dental | 0.00 |
| 1503 | Nicholas, Jason | Nicholas, Roger | United Parcel Service [2] 29290 | Prim Dental | 0.00 |
| 1501 | Nicholas, Roger | Nicholas, Roger | United Parcel Service [2] 29290 | Prim Dental | 0.00 |
| 1604 | Ostendorf, Kevin | Ostendorf, Robert | United Parcel Service [2] 29290 | Prim Dental | 360.00 |

Continued on next page...

PATIENTS BY INSURANCE COMPANY

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Include User Code(s):

Exclude User Code(s): I

[2] Aetna

| ID | Patient Name | Guarantor Name | Plan Name [Plan ID] Group No. | Coverage | Ins Bal |
|--------|------------------|-------------------|--|-------------|---------|
| 1605 | Ostendorf, Wendy | Ostendorf, Robert | United Parcel Service [2] 29290 | Prim Dental | 0.00 |
| 1303 | Pedo, David | Lowry, James | United Parcel Service [2] 29290 | Prim Dental | 0.00 |
| 2001 | Quincy, Julie | Quincy, Mike | United Parcel Service [2] 29290 | Sec Dental | 0.00 |
| 2002 | Quincy, Mike | Quincy, Mike | United Parcel Service [2] 29290 | Prim Dental | 0.00 |
| 2003 | Quincy, Samuel | Quincy, Mike | United Parcel Service [2] 29290 | Sec Dental | 0.00 |
| 2902 | Reeves, Sabrina | Reeves, Scott | Baltimore County Fire Fighters [5] 92900 | Sec Dental | 0.00 |
| 2901 | Reeves, Scott M. | Reeves, Scott | Baltimore County Fire Fighters [5] 92900 | Prim Dental | 0.00 |
| 2903 | Reeves, Sierra | Reeves, Scott | Baltimore County Fire Fighters [5] 92900 | Prim Dental | 0.00 |
| 243401 | Sample, Joe | Sample, Joseph | Baltimore City Police [4] 7897987 | Prim Dental | 215.80 |
| 243402 | Sample, Justin | Sample, Joseph | Baltimore City Police [4] 7897987 | Prim Dental | 63.00 |
| 3303 | Tucker, Jennifer | Tucker, John | United Parcel Service [2] 29290 | Prim Dental | 0.00 |
| 3301 | Tucker, John | Tucker, John | United Parcel Service [2] 29290 | Prim Dental | 0.00 |
| 3304 | Tucker, Katie | Tucker, John | United Parcel Service [2] 29290 | Prim Dental | 0.00 |
| 3302 | Tucker, Valerie | Tucker, John | United Parcel Service [2] 29290 | Sec Dental | 0.00 |

This insurance company provides coverage for 37 patient(s).

[3] Mailhandlers

| ID | Patient Name | Guarantor Name | Plan Name [Plan ID] Group No. | Coverage | Ins Bal |
|-----|----------------|----------------|-----------------------------------|-------------|---------|
| 304 | Baxter, Jack | Baxter, Patty | Thompson Travel Inc. [3] 5656 | Prim Dental | 76.80 |
| 305 | Baxter, Katie | Baxter, Patty | Thompson Travel Inc. [3] 5656 | Prim Dental | 0.00 |
| 302 | Baxter, Patty | Baxter, Patty | Thompson Travel Inc. [3] 5656 | Prim Dental | 327.50 |
| 301 | Baxter, Robert | Baxter, Patty | Thompson Travel Inc. [3] 5656 | Sec Dental | 0.00 |

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PATIENTS BY INSURANCE COMPANY

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Include User Code(s):

Exclude User Code(s): I

[3] Mailhandlers

| ID | Patient Name | Guarantor Name | Plan Name [Plan ID] Group No. | Coverage | Ins Bal |
|------|----------------|----------------|-----------------------------------|-------------|---------|
| 303 | Baxter, Thomas | Baxter, Patty | Thompson Travel Inc [3] 5656 | Prim Dental | 0.00 |
| 1701 | Poll, Harold | Poll, Harold | Thompson Travel Inc. [3] 5656 | Prim Dental | 0.00 |
| 1702 | Poll, Pauline | Poll, Harold | Thompson Travel Inc. [3] 5656 | Prim Dental | 0.00 |

This insurance company provides coverage for 7 patient(s).

[4] Cigna

| ID | Patient Name | Guarantor Name | Plan Name [Plan ID] Group No. | Coverage | Ins Bal |
|------|---------------------|--------------------|----------------------------------|-------------|---------|
| 401 | Culbertson, Thomas | Culbertson, Thomas | Cigna Capitation Plan [24] | Prim Dental | 0.00 |
| 2001 | Quincy, Julie | Quincy, Julie | Black & Decker [6] 778-09 | Prim Dental | 0.00 |
| 2002 | Quincy, Mike | Quincy, Julie | Black & Decker [6] 778-09 | Sec Dental | 0.00 |
| 2003 | Quincy, Samuel | Quincy, Julie | Black & Decker [6] 778-09 | Prim Dental | 0.00 |
| 3504 | Williams, Elizabeth | Williams, Todd | Black & Decker [6] 778-09 | Prim Dental | 0.00 |
| 3503 | Williams, Lance | Williams, Todd | Black & Decker [6] 778-09 | Prim Dental | 0.00 |
| 3502 | Williams, Shelley | Williams, Todd | Black & Decker [6] 778-09 | Sec Dental | 0.00 |
| 3501 | Williams, Todd | Williams, Todd | Black & Decker [6] 778-09 | Prim Dental | 0.00 |

This insurance company provides coverage for 8 patient(s).

[5] Connecticut General

| ID | Patient Name | Guarantor Name | Plan Name [Plan ID] Group No. | Coverage | Ins Bal |
|-------|----------------|----------------|----------------------------------|-------------|---------|
| 17102 | Abbey, Charles | Abbey, Donald | Bank Of America [7] 39393 | Prim Dental | 0.00 |
| 17101 | Abbey, Donald | Abbey, Donald | Bank Of America [7] 39393 | Prim Dental | 56.80 |
| 17105 | Abbey, Joann | Abbey, Donald | Bank Of America [7] 39393 | Prim Dental | 376.50 |

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PATIENTS BY INSURANCE COMPANY

Insurance Company Range: 1 - 21

Include User Code(s):

Exclude User Code(s): I

[5] Connecticut General

| ID | Patient Name | Guarantor Name | Plan Name [Plan ID] Group No. | Coverage | Ins Bal |
|-------|--------------------|----------------|----------------------------------|-------------|---------|
| 17104 | Abbey, Jonathon | Abbey, Donald | Bank Of America [7] 39393 | Prim Dental | 484.00 |
| 2102 | Randall, Elizabeth | Randall, James | Bank Of America [7] 39393 | Prim Dental | 0.00 |
| 2101 | Randall, James | Randall, James | Bank Of America [7] 39393 | Prim Dental | 0.00 |
| 17103 | Scott, Marybeth | Abbey, Donald | Bank Of America [7] 39393 | Prim Dental | 0.00 |

This insurance company provides coverage for 7 patient(s).

[6] Preferred Health Network

| ID | Patient Name | Guarantor Name | Plan Name [Plan ID] Group No. | Coverage | Ins Bal |
|--------|---------------------|------------------|--|-------------|---------|
| 2301 | Duncan, Lawrence F. | Duncan, Rebecca | Central Christian Assembly [10] 622113 | Sec Dental | 0.00 |
| 2302 | Duncan, Rebecca M. | Duncan, Rebecca | Central Christian Assembly [10] 622113 | Prim Dental | 0.00 |
| 243201 | Eaton, Norman | Eaton, Norman | Central Christian Assembly [10] 622113 | Prim Dental | 490.00 |
| 3601 | Vincent, Allen | Vincent, Marlene | Central Christian Assembly [10] 622113 | Sec Dental | 0.00 |
| 3604 | Vincent, Kevin | Vincent, Marlene | Central Christian Assembly [10] 622113 | Sec Dental | 0.00 |
| 3603 | Vincent, Lou | Vincent, Marlene | Central Christian Assembly [10] 622113 | Sec Dental | 0.00 |
| 3602 | Vincent, Marlene | Vincent, Marlene | Central Christian Assembly [10] 622113 | Prim Dental | 0.00 |

This insurance company provides coverage for 7 patient(s).

[7] Lincoln National

| ID | Patient Name | Guarantor Name | Plan Name [Plan ID] Group No. | Coverage | Ins Bal |
|------|----------------|----------------|--|-------------|---------|
| 2802 | Brannon, Laura | Brannon, Laura | Circuit Ct For Balto County [11] 3526891 | Prim Dental | 0.00 |
| 1901 | Grant, Jeffrey | Grant, Jeffrey | Circuit Ct For Balto County [11] 3526891 | Prim Dental | 0.00 |

This insurance company provides coverage for 2 patient(s).

PATIENTS BY INSURANCE COMPANY

Insurance Company Range: 1 - 21

Include User Code(s):

Exclude User Code(s): I

[9] Delta Dental

| ID | Patient Name | Guarantor Name | Plan Name [Plan ID] Group No. | Coverage | Ins Bal |
|------|------------------|------------------|----------------------------------|-------------|----------|
| 3402 | Ingle, Catherine | Ingle, Catherine | Comcast Cable [12] 4785420 | Sec Dental | 0.00 |
| 3401 | Ingle, Chris | Ingle, Catherine | Comcast Cable [12] 4785420 | Sec Dental | 0.00 |
| 3403 | Ingle, Joseph | Ingle, Catherine | Comcast Cable [12] 4785420 | Sec Dental | 0.00 |
| 3103 | Ortho, Amy | Ortho, Anthony | Comcast Cable [12] 4785420 | Prim Dental | 0.00 |
| 3101 | Ortho, Anthony | Ortho, Anthony | Comcast Cable [12] 4785420 | Prim Dental | 1,000.00 |
| 3102 | Ortho, Bonnie | Ortho, Anthony | Comcast Cable [12] 4785420 | Sec Dental | 0.00 |

This insurance company provides coverage for 6 patient(s).

[10] Equicor

| ID | Patient Name | Guarantor Name | Plan Name [Plan ID] Group No. | Coverage | Ins Bal |
|------|---------------------|------------------|----------------------------------|-------------|---------|
| 2301 | Duncan, Lawrence F. | Duncan, Lawrence | Home Depot [17] 433680 | Prim Dental | 0.00 |
| 2302 | Duncan, Rebecca M. | Duncan, Lawrence | Home Depot [13] 433680 | Sec Dental | 0.00 |
| 2501 | Hawkins, Andrew | Hawkins, Andrew | Home Depot [13] 433680 | Prim Dental | 0.00 |
| 2502 | Hawkins, Melissa | Hawkins, Andrew | Home Depot [13] 433680 | Sec Dental | 0.00 |

This insurance company provides coverage for 4 patient(s).

[11] Provident

| ID | Patient Name | Guarantor Name | Plan Name [Plan ID] Group No. | Coverage | Ins Bal |
|--------|--------------|----------------|----------------------------------|-------------|---------|
| 159401 | Cage, Daniel | Cage, Daniel | Provident [18] 369852 | Prim Dental | 0.00 |

This insurance company provides coverage for 1 patient(s).

PATIENTS BY INSURANCE COMPANY

Insurance Company Range: 1 - 21

Include User Code(s):

Exclude User Code(s): I

[12] Teamsters Benefit Trust

| ID | Patient Name | Guarantor Name | Plan Name [Plan ID] Group No. | Coverage | Ins Bal |
|------|-------------------|------------------|----------------------------------|-------------|---------|
| 2501 | Hawkins, Andrew | Hawkins, Melissa | Target Stores [20] 165329 | Sec Dental | 0.00 |
| 2502 | Hawkins, Melissa | Hawkins, Melissa | Target Stores [20] 165329 | Prim Dental | 0.00 |
| 2902 | Reeves, Sabrina | Reeves, Sabrina | Target Stores [20] 165329 | Prim Dental | 0.00 |
| 2901 | Reeves, Scott M. | Reeves, Sabrina | Target Stores [20] 165329 | Sec Dental | 0.00 |
| 2903 | Reeves, Sierra | Reeves, Sabrina | Target Stores [20] 165329 | Sec Dental | 0.00 |
| 3201 | Thomas, Daniel L. | Thomas, Erica | Target Stores [20] 165329 | Sec Dental | 119.40 |
| 3202 | Thomas, Erica A. | Thomas, Erica | Target Stores [20] 165329 | Sec Dental | 327.50 |
| 3203 | Thomas, Samantha | Thomas, Erica | Target Stores [20] 165329 | Sec Dental | 0.00 |

This insurance company provides coverage for 8 patient(s).

[13] Travelers

| ID | Patient Name | Guarantor Name | Plan Name [Plan ID] Group No. | Coverage | Ins Bal |
|------|------------------|------------------|------------------------------------|-------------|---------|
| 3001 | Sanders, Barbara | Sanders, Barbara | Maryland Telephone [16] 188753 | Prim Dental | 0.00 |
| 3601 | Vincent, Allen | Vincent, Allen | Maryland Telephone [16] 188753 | Prim Dental | 327.50 |
| 3604 | Vincent, Kevin | Vincent, Allen | Maryland Telephone [16] 188753 | Prim Dental | 0.00 |
| 3603 | Vincent, Lou | Vincent, Allen | Maryland Telephone [16] 188753 | Prim Dental | 0.00 |
| 3602 | Vincent, Marlene | Vincent, Allen | Maryland Telephone [16] 188753 | Sec Dental | 0.00 |

This insurance company provides coverage for 5 patient(s).

[14] John Hancock

| ID | Patient Name | Guarantor Name | Plan Name [Plan ID] Group No. | Coverage | Ins Bal |
|-----|--------------|----------------|--------------------------------------|-------------|---------|
| 701 | Eagan, Anna | Eagan, Anna | Speedy Auto Service [19] 3254105 | Prim Dental | 0.00 |

This insurance company provides coverage for 1 patient(s).

PATIENTS BY INSURANCE COMPANY

Insurance Company Range: 1 - 21

Include User Code(s):

Exclude User Code(s): I

[15] ITT Harford

| ID | Patient Name | Guarantor Name | Plan Name [Plan ID] Group No. | Coverage | Ins Bal |
|------|-------------------|-----------------|-------------------------------------|-------------|---------|
| 2402 | Ellis, Karen L. | Ellis, Karen | Metro Food Markets [17] 9954702 | Prim Dental | 49.00 |
| 2601 | Jacobs, Calvin | Jacobs, Mary | Metro Food Markets [17] 9954702 | Sec Dental | 0.00 |
| 2604 | Jacobs, Elizabeth | Jacobs, Mary | Metro Food Markets [17] 9954702 | Sec Dental | 0.00 |
| 2602 | Jacobs, Mary | Jacobs, Mary | Metro Food Markets [17] 9954702 | Prim Dental | 0.00 |
| 2603 | Jacobs, Michael | Jacobs, Mary | Metro Food Markets [17] 9954702 | Sec Dental | 0.00 |
| 3303 | Tucker, Jennifer | Tucker, Valerie | Metro Food Markets [17] 9954702 | Sec Dental | 0.00 |
| 3301 | Tucker, John | Tucker, Valerie | Metro Food Markets [17] 9954702 | Sec Dental | 0.00 |
| 3304 | Tucker, Katie | Tucker, Valerie | Metro Food Markets [17] 9954702 | Sec Dental | 0.00 |
| 3302 | Tucker, Valerie | Tucker, Valerie | Metro Food Markets [17] 9954702 | Prim Dental | 0.00 |

This insurance company provides coverage for 9 patient(s).

[16] General American

| ID | Patient Name | Guarantor Name | Plan Name [Plan ID] Group No. | Coverage | Ins Bal |
|-----|----------------|----------------|------------------------------------|-------------|---------|
| 302 | Baxter, Patty | Baxter, Robert | Baxter Refinishing [9] 4652034 | Sec Dental | 0.00 |
| 301 | Baxter, Robert | Baxter, Robert | Baxter Refinishing [9] 4652034 | Prim Dental | 0.00 |

This insurance company provides coverage for 2 patient(s).

[17] Ameritas

| ID | Patient Name | Guarantor Name | Plan Name [Plan ID] Group No. | Coverage | Ins Bal |
|------|--------------------|-------------------|-------------------------------------|-------------|---------|
| 2202 | Brown, Dana | Brown, Dana | Anna's Floral Designs [8] 25305 | Prim Dental | 240.00 |
| 2203 | Brown, Jessica R. | Brown, Dana | Anna's Floral Designs [8] 25305 | Sec Dental | 0.00 |
| 602 | Davidson, Jennifer | Davidson, Michael | Anna's Floral Designs [8] 25305 | Prim Dental | 49.00 |

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PATIENTS BY INSURANCE COMPANY

Insurance Company Range: 1 - 21

Include User Code(s):

Exclude User Code(s): I

[17] Ameritas

| ID | Patient Name | Guarantor Name | Plan Name [Plan ID] Group No. | Coverage | Ins Bal |
|------|-------------------|-------------------|-------------------------------------|-------------|---------|
| 601 | Davidson, Michael | Davidson, Michael | Anna's Floral Designs [8] 25305 | Prim Dental | 0.00 |
| 2701 | Doe, Anna | Doe, Anna | Anna's Floral Designs [8] 25305 | Prim Dental | 49.00 |
| 1202 | Klien, Henry | Klien, Marie | Anna's Floral Designs [8] 25305 | Prim Dental | 0.00 |
| 1201 | Klien, Marie | Klien, Marie | Anna's Floral Designs [8] 25305 | Prim Dental | 45.00 |
| 1203 | Klien, Peter | Klien, Marie | Anna's Floral Designs [8] 25305 | Prim Dental | 137.00 |

This insurance company provides coverage for 8 patient(s).

[18] First Health

| ID | Patient Name | Guarantor Name | Plan Name [Plan ID] Group No. | Coverage | Ins Bal |
|------|---------------------|-------------------|--|-------------|---------|
| 3504 | Williams, Elizabeth | Williams, Shelley | Kindercare Learning Centers [14] 84962 | Sec Dental | 0.00 |
| 3503 | Williams, Lance | Williams, Shelley | Kindercare Learning Centers [14] 84962 | Sec Dental | 0.00 |
| 3502 | Williams, Shelley | Williams, Shelley | Kindercare Learning Centers [14] 84962 | Prim Dental | 0.00 |
| 3501 | Williams, Todd | Williams, Shelley | Kindercare Learning Centers [14] 84962 | Sec Dental | 0.00 |

This insurance company provides coverage for 4 patient(s).

[21] Department Of Public Welfare

| ID | Patient Name | Guarantor Name | Plan Name [Plan ID] Group No. | Coverage | Ins Bal |
|------|-----------------|------------------|----------------------------------|-------------|---------|
| 1403 | Medicaid, Manny | Medicaid, Manuel | Dept. Of Public Welfare [23] | Prim Dental | 40.00 |

This insurance company provides coverage for 1 patient(s).