

Bundle with Blue

Pediatric Dental coverage for members up to age 19 is included* in all SimplyBlue Plus plans.

With Excellus BCBS Pediatric Dental coverage you automatically receive:

- Most convenient way to provide Affordable Care Act (ACA) mandated essential benefits
- Limited services – covers full range of diagnostic, palliative and therapeutic services, but not as robust as our stand-alone dental plans
- Cost share varies by plan, and is subject to medical deductible:
 - > Standard = PCP Copay
 - > Select = 100%/80%/50%/50%
(100% preventive coverage before deductible on Hybrid plans)
- Preventive services including cleanings, fluoride treatments & sealants
- Routine exams, x-rays and fillings
- Restorative root canals, stainless steel crowns, stabilization of cleft palate
- Orthodontics to treat serious medical conditions

Full family coverage is available through our Dental Blue Options plans.

We offer two plans to compliment your compliant pediatric coverage, depending on your need.

Plan A Dental Blue Options	Plan B Dental Blue Options with Rider
<p>Ideal for families looking for comprehensive benefits for everyone</p> <p>Children under 19 get dental benefits above and beyond what is covered under the medical plan, such as porcelain crowns and implants</p> <p>Pediatric benefits would not be subject to the medical plan deductibles</p> <p>Allows greater plan design flexibility than embedded dental</p> <p>More extensive coverage under the fee schedule for the entire family</p> <p>Guidelines for coverage are less restrictive</p> <p>Comprehensive ortho can be added as a rider for children to age 19</p>	<p>Cost-effective solution for adults over age 19</p> <p>More extensive coverage under the fee schedule for adults</p> <p>Guidelines for coverage are less restrictive</p> <p>Comprehensive ortho can be added as a rider for children to age 19</p>

No matter which dental plan you choose, when you choose Excellus BCBS you get:

- Strong local dental network, whether stand-alone or embedded
- Broad network of dental providers includes 80% provider participation in the Rochester area
- Flexible benefit options on stand-alone products
- Competitive dental rates
- One-stop shop for comprehensive medical and dental coverage
- Local carrier with strong ties to the community

** Off exchange plans only. Pediatric coverage may be removed if group attests to having compliant coverage elsewhere.*

Small Group Dental Blue Option Packages

Includes Comprehensive Ortho for children to age 19										
Plan Type	Deductible	Annual Max	Ortho Max Options	Class I	Class II	Class IIA	Class III	Class IV	Dental Blue Option Package ID	Dental Blue Option Package ID - Excludes coverage for 18 and under
Employer Sponsored	\$25	\$500	\$750	80%	50%	50%	50%	50%	DBOC-20-26/26	DBOL-20-26/26
		\$1,000	\$750	100%	50%	50%	50%	50%	DBOC-17-26/26	DBOL-17-26/26
			\$1,000						DBOC-18-26/26	DBOL-18-26/26
			\$1,500						DBOC-19-26/26	DBOL-19-26/26
	\$1,000	\$750	100%	85%	85%	50%	50%	DBOC-14-26/26	DBOL-14-26/26	
		\$1,000						DBOC-15-26/26	DBOL-15-26/26	
	\$50	\$1,000	\$1,000	100%	50%	50%	50%	50%	DBOC-5-26/26	DBOL-5-26/26
		\$1,000	\$750	100%	80%	80%	50%	50%	DBOC-16-26/26;	DBOL-16-26/26
			\$1,000						DBOC-3-26/26; DBOC-11-26/26*	DBOL-3-26/26; DBOL-11-26/26*
			\$2,000						DBOC-2-26/26	DBOL-2-26/26
		\$1,500	\$1,000	100%	80%	50%	50%	50%	DBOE-6E-26/26	DBOL-6E-19/23; DBOL-6E-26/26
			\$2,000	100%	80%	80%	50%	50%	DBOC-1-26/26; DBOC-12-26/26*	DBOL-1-26/26; DBOL-12-26/26*
	\$75	\$1,000	\$1,000	100%	50%	50%	50%	50%	DBOC-21-26/26	DBOL-21-26/26
	Voluntary	\$50	\$1,000	\$1,000	100%	50%	50%	50%	50%	DBOV-15-26/26
\$1,000			\$1,000	100%	80%	80%	50%	50%	DBOV-1E-26/26	DBLV-1E-26/26
\$1,500			\$1,500	100%	80%	80%	50%	50%	DBOV-1E-26/26	DBLV-1E-26/26
\$75		\$1,000	\$1,000	100%	80%	50%	50%	50%	DBOV-11-26/26	DBLV-11-26/26

Excludes Comprehensive Ortho										
Plan Type	Deductible	Annual Max	Ortho Max Options	Class I	Class II	Class IIA	Class III	Class IV	Dental Blue Option Package ID	Dental Blue Option Package ID - Excludes coverage for 18 and under
Employer Sponsored	\$25	\$500	N/A	80%	50%	50%	50%	0%	DBOC-24-26/26	DBOL-24-26/26
		\$750	N/A	100%	80%	80%	0%	0%	DBOC-23-26/26	DBOL-23-26/26
	\$50	\$750	N/A	100%	50%	50%	50%	0%	DBOC-13-26/26*	DBOL-13-26/26*
		\$1,000	N/A	80%	50%	50%	50%	0%	DBOC-8-26/26	DBOL-8-26/26
		\$1,000	N/A	100%	50%	50%	50%	0%	DBOC-6-26/26	DBOL-6-26/26
		\$1,000	N/A	100%	80%	50%	50%	0%	DBOE-18E-26/26	DBOL-18E-26/26
		\$1,000	N/A	100%	80%	80%	0%	0%	DBOC-7-26/26	DBOL-7-26/26
		\$1,000	N/A	100%	80%	80%	50%	0%	DBOC-4-26/26	DBOL-4-26/26
		\$1,500	N/A	100%	80%	80%	50%	0%	DBOC-22-26/26	DBOL-22-26/26
	\$75	\$1,000	N/A	100%	80%	50%	50%	0%	DBOC-25-26/26	DBOL-25-26/26
Voluntary	\$50	\$1,000	N/A	100%	50%	50%	50%	0%	DBOV-6-26/26	DBLV-6-26/26
		\$1,000	N/A	100%	80%	50%	50%	0%	DBOV-13-26/26	DBLV-13-26/26
		\$1,000	N/A	100%	80%	80%	0%	0%	DBOV-12-26/26	DBLV-12-26/26
		\$1,000	N/A	100%	80%	50%	50%	0%	DBOV-4-26/26	DBLV-4-26/26
	\$75	\$1,000	N/A	100%	80%	50%	50%	0%	DBOV-14-26/26	DBLV-14-26/26

* Plans only available in the East regions