

Dental Blue Options

Plan coverage.

You may choose to offer Dental Blue Options on a voluntary basis. A voluntary plan is one in which employees pay the full premium and professionals from our BlueShield Network provide the services.

You may choose to add a reduced out-of-network benefit. The reduced out-of-network benefit would be a 20% reduction from the in-network options (not to go below a benefit of 40%).

For Classes II, IIA and III, deductible options include \$0, \$25 or \$50 per individual. (Family is calculated to three times the individual deductible.)

You also choose an annual maximum for your plan, which would apply to Classes II, IIA and III. Annual maximum options include: \$1,000, \$1,500 and \$2,000 per individual.

If Class IV is included in the plan, you can choose an orthodontia lifetime maximum of which half the maximum can be incurred annually. The lifetime maximum options include \$500, \$1000, \$1250, \$1500 and \$2000 per individual.

Class IV benefits may be subject to a 12 month waiting period if a voluntary plan is chosen.

Pre-treatment estimates are recommended for extensive treatment (e.g. periodontics, prosthetics and orthodontics). We will review the dentist's treatment report and notify the employee and dentist of the benefits payable.



Do you have the right dental plan
for your employees?

Dental Blue Options

Dental coverage is important to keep employees healthy.



Good dental hygiene and care promote overall health. Regular checkups and routine cleanings are simple ways to keep a healthy mouth and prevent major dental problems.

Dental Blue Options is all about value. This plan gives you the opportunity to offer dental coverage to your employees with a variety of covered service options, as well as a range of coinsurance, deductible and annual maximum options available.

With an emphasis on preventive care and access to a broad network of dentists, Dental Blue Options helps your employees maintain their oral health, reducing the need for more costly dental care in the future.

Dental Blue Options plan benefits:

- Easy access to a broad network of providers
- Lower out-of-pocket costs when members use the network
- National network option available
- 100% employee-paid options available

Easy access to dental care.

For covered dental services, participating dentists are paid directly by Excellus BlueCross BlueShield. There are no claim forms to fill out.

A dental plan that fits your needs.

Our website helps you and your employees connect to all our plans, programs, resources and Web tools with ease – 24/7.

- Find health care and coverage advice available 24/7
- Find a dentist, doctor or specialist online
- Live healthier with Step Up, our free fitness and nutrition program
- Search more than 6,000 health topics online
- Save on health and wellness programs with member discounts
- Learn how to save on prescription drugs

To learn about Dental Blue Options or other products that fit your business, contact your Sales Consultant or Broker. Or see more at excellusbcbcs.com

Design a plan from five categories of dental services:

CLASS I IN-NETWORK COINSURANCE OPTIONS

Preventive & Diagnostic 100%, 80%, 50%
Cleanings and exams
Fluoride treatments for children to age 16
X-rays

CLASS II IN-NETWORK COINSURANCE OPTIONS

Basic Restorative 100%, 80%, 50%
Fillings
Oral surgery (simple extractions)

CLASS IIA IN-NETWORK COINSURANCE OPTIONS

Basic Restorative 100%, 80%, 50%
Oral surgery (complex extractions)
Endodontics (root canal)
Periodontal surgery

CLASS III IN-NETWORK COINSURANCE OPTIONS

Major Restorative 80%, 50%
Fixed prosthetics (bridge, abutments)
Inlays/Onlays/Crowns

CLASS IV IN-NETWORK COINSURANCE OPTIONS

Orthodontia* 50%, Not Covered
Braces up to age 19

About the network.

Dental Blue Options participating dentists agree to accept the schedule of allowances as payment in full for covered services, and payment is made directly to the dentist. The member is liable only for coinsurance and deductible amounts and charges after annual maximums are met.

If services are rendered by a non-participating dentist, benefit payment will be made directly to the member. The member is liable for coinsurance and deductible amounts, plus any difference between the allowed amount and the dentist's actual charge.

*Available to groups with 10 or more contracts