



bcbsfepdental.com





### 2021 BLUE CROSS BLUE SHIELD FEP DENTAL INTERNATIONAL BENEFITS

Federal employees, retirees and their covered dependents who travel or live outside the United States are entitled to BCBS FEP Dental International Benefits. See the BCBS FEP Dental brochure for benefit details.

# WHEN YOU ENROLL IN BCBS FEP DENTAL, YOU GET:



FREE preventive care



NO WAITING PERIODS for any services



AN UNLIMITED annual benefit under High Option



**WORLDWIDE** dental coverage

Regular dental care is vital to a healthy lifestyle. Many problems can develop in the mouth without warning and may require more extensive and expensive treatment if found too late.

## **FIND A PROVIDER**

Keep your in-network benefits by receiving care from any dentist in our international dental program. English-speaking dentists are available in approximately 100 countries worldwide.



## **ONLINE**

Visit <u>bcbsfepdental.com</u> and click on "International Services" then select "International Directory" to see a list of overseas dentists.



## **BY PHONE**

Calling from outside the U.S.? Dial the outbound country code + 353 94 9372257.

#### SUBMIT YOUR CLAIMS

Based on your plan, we will pay an equal percentage of benefits for your incurred charges.

- 1. Pay your dentist.
- Download claims forms online at <u>bcbsfepdental.com</u>.
- 3. Mail your claim form and receipt to:

BCBS FEP Dental Claims PO Box 75 Minneapolis, MN 55440-0075

 Receive your reimbursement in U.S. dollar based on the OANDA Rates<sup>™</sup> currency conversion rate.

To enroll visit **BENEFEDS.com** or call **1-877-888-FEDS** (3337), TTY: 711. If calling from outside of the U.S., call **1-571-730-5942**.

Open Season runs November 9 through midnight December 14, 2020, Eastern time.

## 2021 Summary of Benefits

Benefits	High Option		Standard Option	
	IN-NETWORK	OUT-OF-NETWORK	IN-NETWORK	OUT-OF-NETWORK
Class A (Basic) Services	100%	90%	100%	60%
e.g., exams, cleanings, X-rays, sealants	THREE CLEANINGS A YEAR COVERED		THREE CLEANINGS A YEAR COVERED	
Class B (Intermediate) Services e.g., oral surgery, fillings, gum scaling	70%	60%	55%	40%
Class C (Major) Services e.g., crowns, bridges, implants, root canals, dentures	50%	40%	35%	20%
Annual Deductible for Class A, B and C Services Does not apply to Class D (Orthodontics)	No deductible	<b>\$50</b> per person	No deductible	<b>\$75</b> per person
Annual Maximum Benefits for Class A, B and C Services  Does not apply to Class D (Orthodontics)	UNLIMITED MAXIMUM PER PERSON	<b>\$3,000</b> per person	<b>\$1,500</b> per person	<b>\$750</b> per person
Class D (Orthodontic) Services Adults & Children	50% up to \$3,500 lifetime maximum per person	<b>50</b> % up to allowed amount	50% up to \$2,500 lifetime maximum per person	50% up to \$1,250 lifetime maximum per person
	NO WAITING PERIOD		NO WAITING PERIOD	

IMPORTANT: See the 2021 BCBS FEP Dental brochure for more details; do not rely on this chart alone.

### 2021 Premiums: Live outside the U.S.? We've recently lowered our premiums—find yours below.

Premiums	BI-WEEKLY		MONTHLY	
	High	Standard	High	Standard
Self Only	\$17.31	\$9.16	\$37.51	\$19.85
Self + One	\$34.63	\$18.32	\$75.03	\$39.69
Self & Family	\$51.94	\$27.49	\$112.54	\$59.56

## Learn more at bcbsfepdental.com





Oral health tips



Benefit information



information



#### **Questions? Contact BCBS FEP Dental Customer Service:**

In the U.S.: **1-855-504-BLUE** (2583), TTY: 711 (8 a.m. to 8 p.m. EST, M-F). Outside the U.S., call collect: 1-651-994-BLUE (2583).



Stay connected @bcbsfepdental