

2024 DENTAL COVERAGE SUMMARY

Blue Cross Blue Shield FEP Dental



**Helping you and your family
smile with confidence
That's the Benefit of Blue.®**



FEP Dental®

bcbsfepdental.com

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Get to know BCBS FEP Dental

BCBS FEP Dental is a supplemental dental plan offered as part of the Federal Employees Dental and Vision Insurance Program (FEDVIP), which is a voluntary, member-pay-all dental and vision insurance program. With our comprehensive dental coverage, BCBS FEP Dental can help you and your family smile with confidence.

That's the Benefit of Blue.®

Why dental care is important

This booklet gives you a closer look at everything our dental plan has to offer. But let's first understand why dental care is so important to you and your family's health. Many medical conditions are linked to oral infections. Others may negatively impact oral health. These include:

- Anemia
- Cancer
- Celiac disease
- Colitis
- Diabetes
- Gastroesophageal reflux disease (GERD)
- Human immunodeficiency viruses (HIV)
- Kidney disease
- Leukemia
- Osteoporosis
- Pregnancy & birth complications
- Sexually transmitted infections (STIs)
- Sjögren's syndrome

Your dentist may be the first to notice an issue that may point to other health problems, such as those listed above.

Let's look at some interesting facts

- ✓ 1 in 4 adults aged 20 to 64 currently has cavities.
- ✓ Gum disease (periodontitis) is a leading cause of tooth loss.
- ✓ Using tobacco, a weakened immune system or poor oral health can increase your risk for gum disease.
- ✓ Gum disease appears more frequently and severely among people who have diabetes.
- ✓ Research suggests that heart disease, clogged arteries and stroke might be linked to the inflammation and infections that oral bacteria can cause.
- ✓ Gum disease has been linked to premature birth and low birthweight.
- ✓ Every year, 34 million school hours are lost because of unplanned dental care.
- ✓ Over \$45 billion in U.S. productivity is lost every year due to untreated dental disease.

Sources: <https://www.cdc.gov/oralhealth/fast-facts/index.html>
<https://www.mayoclinic.org/healthy-lifestyle/adult-health/in-depth/dental/art-20047475>

Did you know?

Regular dental cleanings may help prevent other health concerns. Doctors recommend that cancer patients and organ transplant patients have a dental checkup and all dental work completed before any medical procedure begins. This helps reduce the risk of infection afterward.



BCBS FEP Dental supports all members

If you have a serious health condition, such as diabetes, heart disease, end-stage renal (kidney) disease, head and neck cancer, a suppressed immune system or are pregnant, we can support your dental health needs.

That's because BCBS FEP Dental covers a wide variety of services, including:

- Oral evaluations
- Palliative treatments (non-curative pain relief services)
- Periodontal scaling and root planing (deep cleaning)
- Periodontal maintenance (maintenance for gum disease)
- Extensive removal of plaque and tartar buildup (full mouth debridement)



We define many of the terms used in this guide on **pages 23-24** so you can better understand your coverage. You can also find all of these definitions at [bcbsfedental.com/dentaldictionary](https://www.bcbsfedental.com/dentaldictionary).

Why choose BCBS FEP Dental

With BCBS FEP Dental, you get:



Fully-covered, in-network preventive care, including up to **three** dental cleanings a year



No deductible for in-network services



Benefits start right away—there's no waiting period for in-network coverage



An unlimited annual benefit with High Option when seeing in-network dentists—there's no limit to the amount we cover for the year



Worldwide coverage with all overseas services at the in-network level



Access to exclusive health and wellness discounts with Blue365®

We have two plan options:



High Option



Standard Option

We have three different enrollment types:



Self Only



Self + One



Self & Family

Enrolling in coverage

Who can enroll

BCBS FEP Dental is available to federal employees, USPS employees, retired federal employees, retired USPS employees, retired uniformed service members and their families.



Federal employees

If you're an active or retired federal employee, you're eligible if you currently qualify for the **Federal Employees Health Benefits (FEHB) Program**—even if you're not currently enrolled. You can also enroll your spouse and unmarried children under age 22. Children over 22 who are incapable of self support may also be eligible.

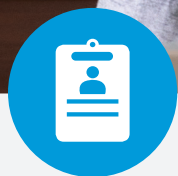


Retired uniformed service members

For uniformed service members, most retirees are eligible. You can also cover your spouse and unmarried children who are under 21 if they are not in school. You can cover children in school full-time up to age 23.



Proudly supporting our
**Uniformed Service Retirees
and their Families**
with quality dental coverage



How to enroll

BENEFEDS is the benefits marketplace that eligible participants use to shop for, enroll in and pay for voluntary benefits, including dental and vision plans available through FEDVIP. You can enroll during the annual federal health benefits Open Season.

Open Season is November 13 through midnight ET, December 11, 2023

If it's outside of Open Season, you can enroll if you are a new federal employee or are newly retired from the uniformed services. You can also enroll if you have a qualifying life event (QLE), such as a marriage or divorce. For more information on QLEs, visit [BENEFEDS.com](https://www.benefeds.com) and search "QLE".

There are two ways to enroll:



Online at [BENEFEDS.com](https://www.benefeds.com).
Go to the "Programs" section of the site and select "Enroll" under Dental and Vision.



Call BENEFEDS at
1-877-888-FEDS (3337).
(TTY: 1-877-889-5680)

BCBS FEP Dental benefits

Determining your coverage for services

The information on these pages will give you a better idea of what's covered in each coverage class: A, B, C and D as well as some general services we cover. Both High Option and Standard Option members have access to these benefits as soon as your enrollment begins. We cover both children and adults for dental care services, except where noted.



Some general services we cover

- Anesthesia services provided alongside covered surgical procedures
- Athletic mouthguards and occlusal guards

NEW

NEW: Nitrous oxide (laughing gas) for children 5 and under as well as other individuals with a medical condition who may require it

Class A: Preventive & Diagnostic Services



Class A covers basic services, including oral exams, prophylaxis, sealants and X-rays. We cover these services in full when you see an in-network dentist.

Under Class A, we cover:

- Up to three cleanings per member each year
- Topical fluoride twice a year for members up to the age of 22
- Sealants for members up to the age of 22
- A range of diagnostic services, such as certain oral exams and X-ray images

NEW

Two routine oral exams and one additional exam if a problem happens between checkups

Class B: Minor Restorative Services

Class B covers intermediate services, including restorative procedures such as fillings, periodontal scaling and root planing, tooth extractions and denture adjustments.

Under Class B, we cover:

- Both tooth colored and silver fillings
- Post and core procedures
- Re-cementing an existing crown
- Some endodontic services, such as pulp caps, pulpotomy, pulpal therapy and pulpal regeneration
- Periodontal scaling and root planing (deep cleaning)
- Existing denture care, including adjustments, repairs, adding teeth to an existing removable denture, reline or rebase an existing removable denture, tissue conditioning and re-cementing a fixed partial denture (bridge)
- Oral surgery, including extractions

Class C: Major Services

Class C covers major services, including some endodontic services, such as root canals, as well as periodontal services, such as surgery, to treat gingivitis (gingivectomy). It also covers major restorative services, such as crowns and bridges, and prosthodontic services, such as complete dentures.



Tip: we recommend a pretreatment estimate before getting any Class C services. See **page 18** for details.

Under Class C, we cover:

- Porcelain, ceramic or metal crowns
- Root canals and related services
- Surgical periodontal services (e.g., gingivectomy, gingivoplasty, osseous surgery and some bone and tissue grafts)
- Removable dentures (full and partial) and fixed partial dentures (bridges)
- Implants and implant-supported single crowns, bridges and dentures

Class D: Orthodontic Services

Under Class D, we cover orthodontics. This includes braces and retainers for both children and adults.

What you pay for common services

Benefit	High Option		Standard Option	
	IN-NETWORK	OUT-OF-NETWORK	IN-NETWORK	OUT-OF-NETWORK
Class A (Basic) Services e.g., exams, cleanings, X-rays, sealants	You pay nothing .	You pay 10% .	You pay nothing .	You pay 40% .
Class B (Intermediate) Services e.g., oral surgery, fillings, gum scaling	You pay 30% .	You pay 40% .	You pay 45% .	You pay 60% .
Class C (Major) Services e.g., crowns, bridges, implants, root canals, dentures	You pay 50% .	You pay 60% .	You pay 65% .	You pay 80% .
Class D (Orthodontic) Services Adults & Children	You pay 50% up to \$3,500 lifetime maximum per person.	You pay 50% up to \$3,500 lifetime maximum per person.	You pay 50% up to \$2,500 lifetime maximum per person.	You pay 50% up to \$1,250 lifetime maximum per person.

Annual Deductible for Class A, B and C Services Does not apply to Class D (Orthodontics)	You pay no deductible .	You pay \$50 per person.	You pay no deductible .	You pay \$75 per person.
Annual Maximum Benefits for Class A, B and C Services Does not apply to Class D (Orthodontics)	No benefit limit.	We pay up to \$3,000 per person.	We pay up to \$1,500 per person.	We pay up to \$750 per person.



For both High Option and Standard Option, Classes B and C are covered at **100%** for children age 13 and under when visiting an in-network dentist.



NEW

Here are new benefits for both High Option and Standard Option in 2024:

- We will cover two routine oral exams and one additional exam if a problem happens between checkups. We previously covered just two oral exams.
- We will cover nitrous oxide (laughing gas) for children 5 and under as well as other individuals with a medical condition who may require it.

Your cost for dental services varies

How much you pay is called your cost share. To figure out what you'll pay, find the Class for your service in the table to the left or in the BCBS FEP Dental brochure.

Here's an example of how your cost share works:



The cost for a filling at your in-network dentist is **\$297**, a Class B service



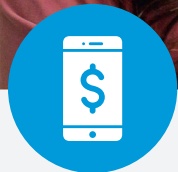
As a High Option member, you pay **30%** of this cost

What you pay

30% of \$297 = **\$89.10**

What we pay

\$207.90



Dental Care Pricing Tool

Want to know what you'll pay for your dental services before you receive care? Use our Dental Care Pricing Tool. You can enter your ZIP Code to find estimated dental procedure costs for services in your area. Try it at bcbsfedental.com/pricetool.

2024 premiums

BCBS FEP Dental premiums are based on where you live. To find your premium, use the charts below or the online premium finder tool mentioned on the next page.

1 Find your rating area

Start by finding your state and/or ZIP Code in the chart below.

State	First 3 digits of your ZIP Code	Rating Area	State	First 3 digits of your ZIP Code	Rating Area	State	First 3 digits of your ZIP Code	Rating Area
AK	Entire State	5	KY	Entire state	1	NY	Rest of state	2
AL	Entire state	1	LA	Entire state	1	OH	Entire state	1
AR	Entire state	2	MA	010-011, 013-027, 055	5	OK	Entire state	1
AZ	855, 859-860, 863-865	2	MA	Rest of state	3	OR	970-973	4
AZ	850-853	3	MD	205-212, 214, 216-217	3	OR	Rest of state	2
AZ	Rest of state	1	MD	Rest of state	2	PA	189-196	2
CA	900-908, 910-928, 930-931, 933-935	4	ME	039-042	5	PA	172-174	3
CA	939-952, 954, 956-959	5	ME	Rest of state	2	PA	180-181, 183	4
CA	Rest of state	2	MI	480-485	2	PA	Rest of state	1
CA	Rest of state	2	MI	Rest of state	1	PR	Entire area	1
CO	Entire state	4	MN	550-551, 553-555, 563	4	RI	Entire state	5
CT	060-063	5	MN	Rest of state	3	SC	Entire state	2
CT	Rest of state	4	MO	726	2	SD	Entire state	1
CT	Rest of state	4	MO	Rest of state	1	SD	Entire state	1
DC	Entire area	3	MS	Entire state	1	TN	Entire state	1
DE	Entire state	2	MT	Entire state	1	TX	Entire state	1
FL	330-334, 349	2	NC	270-274, 278, 280-282, 284-289	2	UT	Entire state	2
FL	Rest of state	1	NC	275-277, 283	3	VA	201, 205, 220-227	3
GA	Entire state	1	NC	Rest of state	1	VA	Rest of state	1
GU	Entire area	1	ND	Entire state	5	VI	Entire area	1
HI	Entire state	3	NE	Entire state	2	VT	Entire state	5
IA	500-514, 516, 520-528	3	NH	030-033, 038	5	WA	980-985	5
IA	Rest of state	2	NH	Rest of state	3	WA	Rest of state	4
ID	Entire state	4	NJ	070-079, 085-089	4	WI	540	4
IL	600-609, 613	2	NJ	Rest of state	2	WI	Rest of state	3
IL	612	3	NM	Entire state	1	WV	254	3
IL	Rest of state	1	NV	897	5	WV	Rest of state	1
IN	463-464	2	NV	Rest of state	2	WY	834	4
IN	Rest of state	1	NY	120-123, 128	3	WY	Rest of state	2
KS	664-665, 667-679	2	NY	005, 100-119, 124-126	4	INTL	International	1
KS	Rest of state	1	NY	063	5			

2 Find your 2024 BCBS FEP Dental premium

Then match the number in the rating area column to the premium chart below to see what you'd pay.

Rating Area	High Option: Bi weekly Premiums			Standard Option: Bi weekly Premiums		
	Self Only	Self + One	Self & Family	Self Only	Self + One	Self & Family
1	\$18.39	\$36.77	\$55.16	\$9.87	\$19.75	\$29.62
2	\$20.60	\$41.20	\$61.80	\$10.82	\$21.63	\$32.45
3	\$22.43	\$44.85	\$67.28	\$12.30	\$24.60	\$36.90
4	\$24.29	\$48.58	\$72.87	\$13.28	\$26.56	\$39.85
5	\$27.19	\$54.37	\$81.56	\$14.67	\$29.33	\$44.00

Rating Area	High Option: Monthly Premiums			Standard Option: Monthly Premiums		
	Self Only	Self + One	Self & Family	Self Only	Self + One	Self & Family
1	\$39.85	\$79.67	\$119.51	\$21.39	\$42.79	\$64.18
2	\$44.63	\$89.27	\$133.90	\$23.44	\$46.87	\$70.31
3	\$48.60	\$97.18	\$145.77	\$26.65	\$53.30	\$79.95
4	\$52.63	\$105.26	\$157.89	\$28.77	\$57.55	\$86.34
5	\$58.91	\$117.80	\$176.71	\$31.79	\$63.55	\$95.33



Try our online premium finder tool

You can also easily find your premium by visiting bcbsfedental.com/premiumfinder and entering your ZIP Code to view premiums based on your area.

Our dental network

BCBS FEP Dental members get access to a large, nationwide network with nearly half a million in-network dentists and their locations.

You have three ways to get the dental care you need:

In-Network Dentists

We are a Preferred Provider Organization or PPO. That means we have a network of dentists who accept our negotiated rate (allowance) as payment in full for their services. We call these our in-network dentists.



You'll pay less when you use these dentists to get the most value from your plan. When you see an in-network dentist, you only pay your coinsurance up front.

Out-of-Network Dentists

With BCBS FEP Dental, you're able to see out-of-network dentists if you choose.



You'll pay a greater percentage of our allowance if you go to an out-of-network dentist (e.g., instead of 30% of our allowance, you'll pay 40% of the allowance). You may also need to pay the difference between what we pay and what the dentist charges. Typically, you need to pay for your services up front and then file a claim to get reimbursed later.

Overseas Dentists

Need to see a dentist while in another country? You're covered overseas at the in-network level. You pay the dentist and then submit a claim to us for reimbursement. Use our overseas provider directory, available at bcbsfepdental.com/internationalservices, to see a list of English-speaking dentists in approximately 100 countries.

You can find an in-network dentist three different ways:



Online at
[bcbsfepdental.com/
findadentist](https://bcbsfepdental.com/findadentist)



Via the **BCBS FEP
Dental app** under the
"Find a Dentist" icon

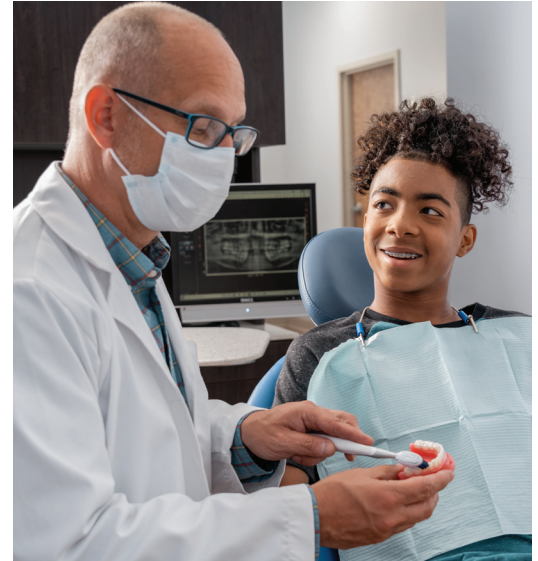


By calling customer service
toll-free at **1-855-504-BLUE (2583)**
weekdays 8 a.m. to 8 p.m. ET

Do you have a dentist you want to join our network?



You can nominate a dentist by either calling customer service or filling out the form at bcbsfedental.com/nominateadentist.

We'll work to contract with the dentist. Please know that this process can take some time.



Get the most out of your dental benefits

See how much you can save annually with BCBS FEP Dental

	What you pay with High Option*	What you pay with Standard Option*	Average cost without BCBS FEP Dental
Two routine oral exams	\$0	\$0	\$120
One problem-focused oral exam	\$0	\$0	\$90
Three cleanings	\$0	\$0	\$305
One set of X-rays	\$0	\$0	\$170
Two fillings ¹	\$65	\$97	\$350
One root canal (molar)	\$450	\$580	\$1,570
One crown (porcelain)	\$435	\$565	\$1,540
What you pay out-of-pocket	\$950 	\$1,242 	\$4,145

¹Anterior tooth colored, one surface each.
*Assumes you visit in-network providers.

Coordination of benefits

Your health insurance coverage may include some dental coverage. If this is the case, your health plan must pay their portion first, and then we will pay our portion. This is called **coordination of benefits**.

What to do if your health insurance covers dental services:

Federal Employees Health Benefits (FEHB) Program

The BCBS FEP Dental network is different from your FEHB medical plan network. If you have dental benefits in your FEHB medical coverage, you should check both networks to confirm whether your dentist is in- or out-of-network for both.

For example, the Blue Cross and Blue Shield Federal Employee Program (FEP) Basic Option and Standard Option include dental coverage for some oral exams, dental X-rays and preventive services. FEP Blue Focus does not include this additional dental coverage.



If you have FEP medical coverage, check provider.fepblue.org to find an in-network dentist before receiving dental services. Then, use our Find a Dentist tool at bcbsfepdental.com/findadentist to see if that dentist is in the BCBS FEP Dental network to get the best coverage and save on out-of-pocket costs.

Your FEHB medical plan must pay their portion of your dental service first, and then we will pay our portion. Make sure you share both your FEHB member ID card and your BCBS FEP Dental member ID card at your dental appointment.

How coordination works with dentists in the FEP medical plan network

We will coordinate benefits on your behalf if you use an in-network dentist in your FEP medical plan and also have BCBS FEP Dental. The dentist can be in- or out-of-network for BCBS FEP Dental.

When we coordinate benefits for you, there's no need for you to submit a claim as long as you provide both your medical and dental member ID cards to your dentist. Your FEP medical Basic Option or Standard Option is always primary to BCBS FEP Dental, so your dentist should submit the initial claim to your FEP medical plan. Your FEP medical plan will then automatically transfer the claim to BCBS FEP Dental to pay secondary.

Did you know?

Under FEP medical's Basic Option, there is a \$30 copay for dental cleanings, but this is waived when you combine with BCBS FEP Dental coverage.

To see what dental services FEP covers under the medical plan, please see section 5(g) of the Blue Cross and Blue Shield Service Benefit Plan brochure – Standard and Basic Options. You can download the brochure at fepblue.org/brochure.



Additional coordination scenarios

If your coverage is in one of these categories, you may need to file the claims yourself:

You have a different, non-FEP, FEHB medical plan that includes dental coverage

Your dentist is out-of-network with your FEP medical plan (regardless of whether they are in- or out-of-network with BCBS FEP Dental)

In these situations, you should ask your dentist if they will submit your claims on your behalf. This may help reduce the number of claims you must submit yourself.

- You **will need** to submit a claim to both your non-FEP FEHB medical plan and to BCBS FEP Dental if your dental office will not submit the claim for you.
- You **will need** to submit a claim to your FEP medical plan if your dental office will not submit the claim for you. You will not need to submit the claim to BCBS FEP Dental because your FEP medical plan will automatically transfer the claim to BCBS FEP Dental for secondary payment.
- You **will not need** to submit a claim if your dental office will submit the claim to your FEP medical plan or to both your non-FEP FEHB medical plan and BCBS FEP Dental for you.

Whether it's you or your dentist submitting your claims, make sure that you always send the claim to your medical insurance first if your medical coverage includes dental benefits. Your medical insurance is primary to BCBS FEP Dental. Once you receive an Explanation of Benefits (EOB) from your medical insurance, you or your dentist can submit your claim to BCBS FEP Dental. Include a copy of the EOB from your medical insurance with the submission.





Please do not submit a BCBS FEP Dental claim until your medical insurance has paid their portion and you receive an EOB. We will have to deny your claim if you submit it beforehand.

Filing your dental claims

If you find you need to file a dental claim, be sure to submit it, along with any receipts associated with your claim and the medical Explanation of Benefits (EOB), when applicable, within 24 months of receiving care. Save time by submitting your claim online or via the **BCBS FEP Dental app**.

Submit your claims online

- 1 To get started, download the claim form on your computer at bcbsfedental.com/claimform. Complete all the fields and print and/or save your form.
- 2 To submit the form online, log in to your secure member account at bcbsfedental.com. Navigate to **Submit a Claim** in the **My Documents** tab.
 -  To submit via the **BCBS FEP Dental app**, select **My Claims** from the app menu and then **Submit a Claim**.
- 3 Attach or, via the app, take a photo of your claim form and associated receipts following the instructions.
 -  *If another insurance carrier already paid for a portion of your service, you'll also need to submit an EOB from that carrier.*
- 4 Click submit once you upload all your documents.

It can take up to 14 days to process your claim. Please submit only one claim form for each submission to ensure we process your claim correctly.



Submit your claims by mail

Download and print your claim form at bcbsfedental.com/claimform or call us at **1-855-504-BLUE (2583)** to request we mail you a paper form. Then mail your completed form, receipts and medical EOB (when applicable) to:

BCBS FEP Dental Claims
P.O. Box 75, Minneapolis, MN 55440-0075

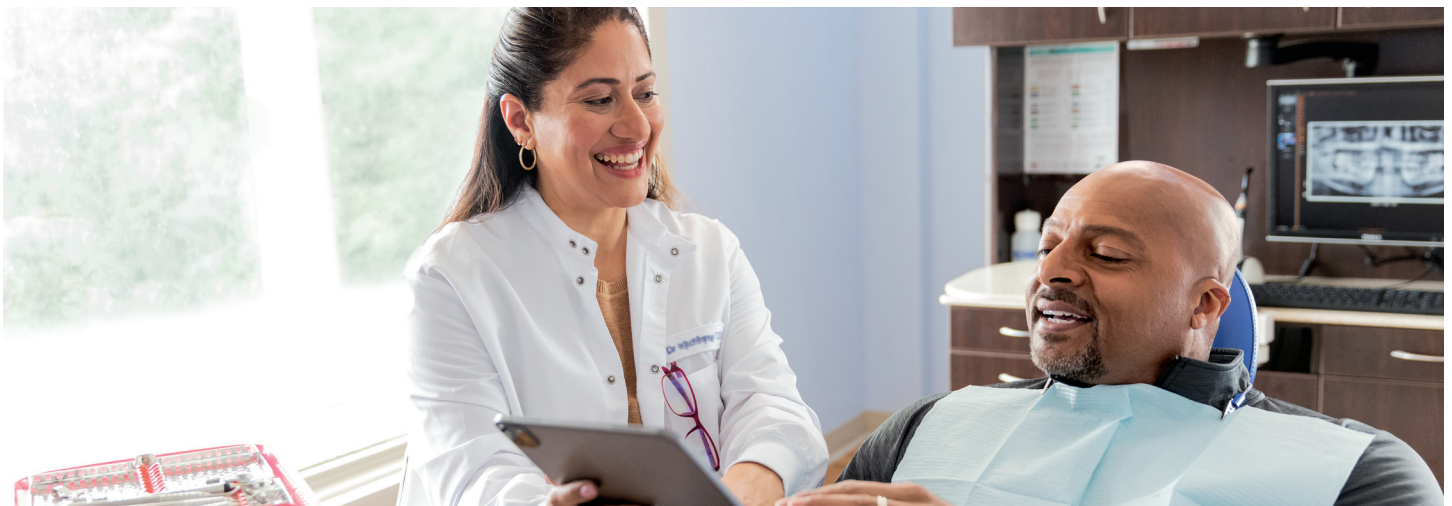
Alternate benefits & pretreatment estimates

Sometimes, more than one procedure is available to treat your dental condition. In these situations, we may approve and cover an **alternative benefit** if there's a less costly service that can appropriately treat your condition.



It's important to ask your dentist about your treatment options and what each service might cost. This will help you understand all of your options and make decisions regarding your care.

If you and your dentist choose to move forward with the more expensive service, you will pay the difference between what we pay and what your dentist charges. This could mean unexpected costs for you.



Pretreatment estimates

If your dentist recommends major or extensive dental services, we highly recommend you ask for a **pretreatment estimate**. We will then provide you with an EOB to let you know what procedures we cover and an estimate of how much you will pay for them based on your benefit plan. Request this before you receive any of the recommended services so you can ensure they fall within your budget.

Your dentist can submit pre-treatment estimate requests directly to us. We also recommend that your dentist include any supporting documents, such as chart notes, a comprehensive treatment plan and dental X-rays taken before your procedure (called **preoperative radiographs**).



You can learn more about pretreatment estimates online at bcbsfedental.com/pretreatment. To request an estimate, call **1-855-504-BLUE (2583)**.



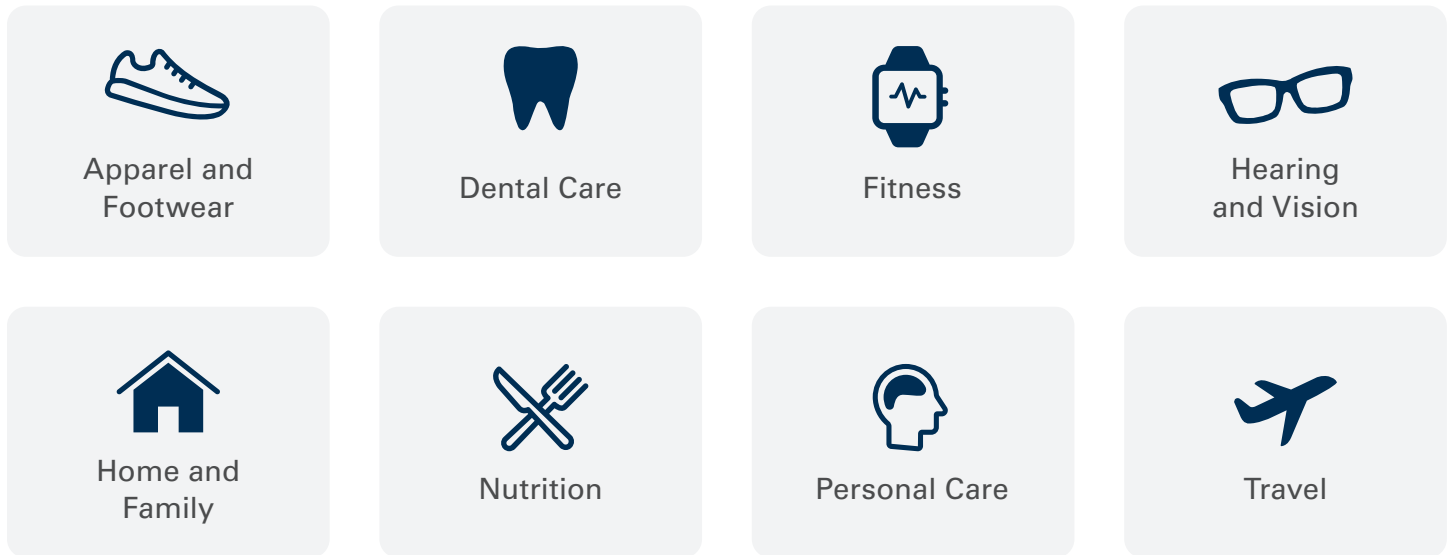
Dental savings checklist

Investing in your overall oral health has lifelong benefits. As your dental insurer, your health and well-being are important to us. Here are some tips to help you save on your dental care:

- Always take your health insurance and your BCBS FEP Dental member ID cards with you to your dental appointments. This helps make sure your claims get paid properly.**
- Get annual preventive dental checkups. Keeping up with your oral health could help prevent more serious issues.**
- Ask questions. Never be afraid to ask your dentist questions if you don't understand your treatment plan, or if you want more information or other treatment options.**
- You can get estimated costs for dental services in your area with our online Dental Care Pricing Tool. Try it at bcbsfedental.com/pricetool.**
- Avoid surprise bills by getting a pretreatment estimate. This can help you know what's covered under your plan. Visit bcbsfedental.com/pretreatment to get started.**
- When necessary, get a second opinion on your services.**
- Use our Blue365[®] discount program to save on items, including dental health and wellness-related items.**

Take advantage of Blue365®

With BCBS FEP Dental coverage, you have access to exclusive health and wellness deals through the Blue365 program. You can receive discounts related to:



If you sign up to receive emails from Blue365, you'll get deals delivered straight to your inbox. You can also access all the deals online 24/7 at blue365deals.com/fep.

See some of the national retailers we partner with through Blue365:*

Dental



Health & Wellness



Lifestyle



*Retailers are subject to change at any time. Always see the most up-to-date list at blue365deals.com/fep.

BCBS FEP Dental tools & resources

We have a variety of online tools and resources that can help you find the right coverage, an in-network dentist, out-of-pocket estimates and more.



AskBlueSM BCBS FEP Dental Plan Finder

Need help deciding if High Option or Standard Option is the right fit for you? Use our simple product selection tool to get a plan recommendation based on you and your family's dental care needs. It only takes a few minutes. Access the tool today at askblue.bcbsfedental.com or via the BCBS FEP Dental app.



Find a Dentist

Use our Find a Dentist tool to find an in-network dentist with ease. Search using your current location or specify another region to search. You can also save locations to your favorites list. Find a dentist today at bcbsfedental.com/findadentist or via the BCBS FEP Dental app.



BCBS FEP Dental Premium Finder

Want to quickly find out your bi-weekly or monthly premium? Enter your ZIP Code into our premium finder and you'll get the High Option and Standard Option premiums for your rating area. Use the tool at bcbsfedental.com/premiumfinder.



Dental Care Pricing Tool

Find estimated out-of-pocket costs for your dental treatments based on where you live—all you need is your ZIP Code. Use the tool today at bcbsfedental.com/pricetool.



Dental Learning Hub

You and your family can learn more about various dental conditions and health topics in our vast Dental Learning Hub. Read through our articles at bcbsfedental.com/oralhealthtips.



Live Chat Feature

Through our secure member portal, you can use our live chat feature to speak to a BCBS FEP Dental representative. Visit bcbsfedental.com then click "Member Login" in the top right corner.



There's more to do and discover on our website

Visit bcbsfedental.com to view important information related to your dental coverage, see your full benefit brochure, register for the member portal to see claims information and more.



We also encourage you to follow us on **Facebook** and **YouTube** at [@bcbsfedental](https://www.facebook.com/bcbsfedental).

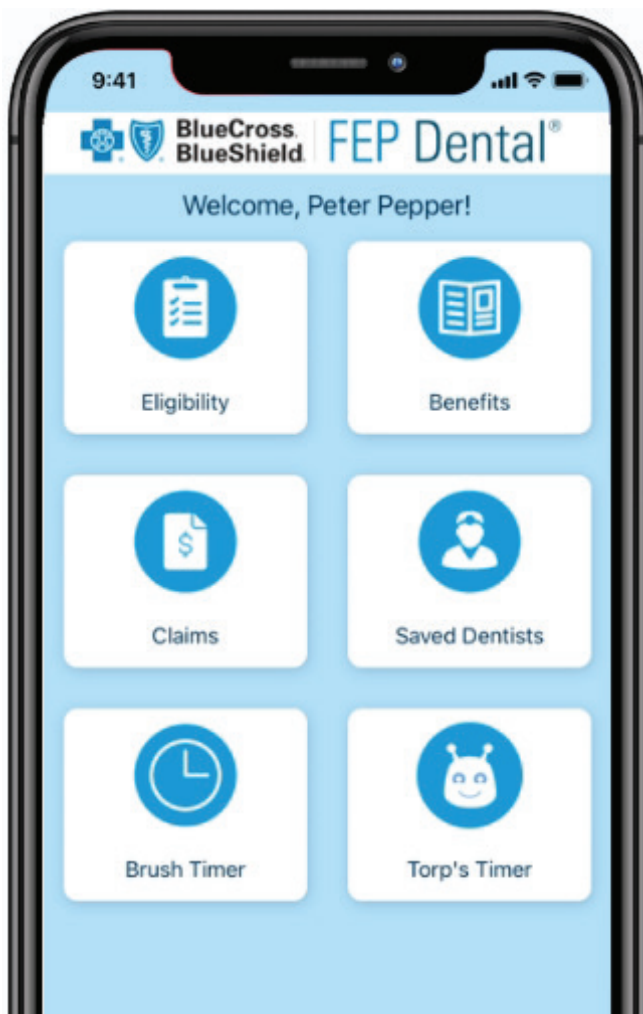
Download the BCBS FEP Dental app

The BCBS FEP Dental mobile app keeps your dental care coverage at your fingertips.

With the app, you can:*

- **Use dentist search tools to find in-network dentists with ease**
Search using your current location or specify another region to search. You can also save clinics to your personal favorites list.
- **See your benefit, coverage and claims information on the go**
View your plan type, benefit levels, deductibles and maximums. Check the status of your family's most recent dental claims.
- **Use the Premium Finder**
Dental plan premium costs are based on where you live. Find yours with our easy-to-use tool.
- **View your digital member ID card**
Show your member ID card at the dentist's office without getting out your wallet. You can also email your member ID card right from the app and have the ability to order replacement cards with just a few taps.
- **Appointment reminder**
You can add scheduled dental appointments and set reminders so you never miss an appointment.
- **Submit a claim**
You can easily submit your dental claims for out-of-network dentists in the app.
- **Find an event**
Look for upcoming virtual and in-person events to learn more about dental health and coverage.
- **Torp's Timer**
This two-minute interactive timer is fun for children of all ages and encourages proper brushing and flossing.

*You must register for a BCBS FEP Dental account to access many of the app's features.



You can download the BCBS FEP Dental app today on the App Store® or Google Play™.



Helpful dental care definitions

Caries

More commonly known as tooth decay, these are caused by a breakdown of the tooth enamel. This is the result of bacteria on teeth that break down foods and produce acid that destroys tooth enamel and results in tooth decay.

Coinsurance

Your share of the costs of a covered health care service, calculated as a percentage (for example, 20%) of our allowance for the service. You pay coinsurance plus any deductibles you owe. For example, if our allowance for an office visit is \$100 and you've met your deductible, your coinsurance payment of 20% would be \$20. We pay the rest of the allowed amount.

Deductible

The amount you owe for covered health care services before we begin to pay. For example, if your deductible is \$50, we won't pay our portion of your service until you've met that amount. The deductible does not apply to all services.

Evaluation

An evaluation is an annual oral checkup to examine your teeth, gums, soft tissue and bite as well as the amount and location of any plaque and tartar. This checkup also includes evaluating any risk factors and checking for any signs of oral diseases or development of diseases.

Fluoride

Fluoride is commonly used in dentistry to strengthen the outer layer of your teeth (enamel) and helps to prevent cavities. It's also added in small amounts to some public water supplies in the U.S. and many other countries. This process is called water fluoridation.

In-network dentist

We have a network of dentists who accept our allowance as payment in full for dental services. Our dental network includes nearly half a million in-network dentists and their locations.

Lifetime maximum coverage

Lifetime maximum is the maximum dollar amount a dental plan will pay toward the cost of orthodontic dental services for an individual's lifetime.

Maximum annual coverage

An annual maximum is the most a dental plan will pay toward the cost of dental services within a specific period, usually a calendar year. If your annual maximum is \$1,500, we will pay our portion of your bill(s) up to that amount for any covered dental services received that year.

Open Season

All actively working or retired federal employees and eligible uniformed service members can enroll in, change or cancel their FEDVIP dental plan during Open Season. It's usually the second Monday of November through the second Monday of December each year.

Orthodontic services

Orthodontic services include things like braces, retainers and other specialty dental treatments to help straighten teeth. We cover both children and adults.

Out-of-network dentist

When you go to a dentist who doesn't have a contract with us, they're out of network. If you choose to see an out-of-network dentist, your out-of-pocket costs will be higher.

Here are some terms that you may see associated with your dental care coverage. For more definitions go to bcbsfepdental.com/dentaldictionary.

Periodontal scaling and root planing

A procedure completed with local anesthesia to remove all the plaque and tartar (hardened plaque) above and below the gum line, making sure to clean all the way down to the bottom of the pocket.

Premium

Your premium is the specific amount you're responsible for paying to your dental plan in exchange for coverage.

Prophylaxis

This is when a dentist or hygienist cleans the teeth by removing plaque, tartar and stains to minimize risk for decay and gingivitis.

Pulp caps

A direct pulp cap is a procedure the dentist does after removing decay and the tooth pulp is exposed. The pulp is covered with a material that protects and promotes healing.

An indirect pulp cap is a procedure to prevent nearly exposed tooth pulp from additional injury and becoming further inflamed. It is a type of sedative placed on top of a thin layer of dentin.

Pulpal regeneration

This is used to restore diseased or damaged dental pulp and to assist in healing.

Pulpal therapy

This is a pediatric dental treatment used to treat and preserve a child's natural tooth that has been affected by an injury or tooth decay.

Pulpotomy

Removal of a portion of the pulp, including the diseased aspect, with the intent of maintaining the vitality of the remaining pulpal tissue by means of a therapeutic dressing.

Qualifying Life Event

You might be able to change your dental plan outside of Open Season if you have a qualifying life event (QLE). These include getting married, having a baby, getting divorced or a change in employee status.

Sealants

Dental sealants are thin coatings that, when painted on the chewing surfaces of the back teeth (molars), can prevent cavities (tooth decay) for many years. Sealants protect the chewing surfaces from cavities by covering them with a protective shield that blocks out germs and food.

Unexpected dental needs

Any dental issues or concerns that are not planned. These include but may not be limited to toothaches, a crown or filling falling out, a chipped or cracked tooth or unexpected mouth or jaw pain.

Unlimited coverage

Unlike annual maximum, unlimited coverage does not have a maximum dollar amount a dental plan will pay toward the cost of dental services within a specific period. High Option has unlimited coverage.



Visit us online

Visit bcbsfedental.com to discover everything BCBS FEP Dental has to offer.



Contact us

Call **1-855-504-BLUE (2583)** (TTY: 711), 8 a.m. to 8 p.m. ET, Monday to Friday.



Enroll

Visit BENEFEDS.com or call **1-877-888-FEDS (3337)** (TTY: 1-877-889-5680).

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This is a summary of the many features and benefits of BCBS FEP Dental®. For a complete description, please view the benefit brochure.

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