



BRUSH UP ON YOUR DENTAL CARE

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.

With Blue Cross Blue Shield FEP Dental, you can keep your dental health in check with great in-network benefits:



UNLIMITED
annual benefit
(under High Option)



WORLDWIDE
dental coverage



NO WAITING PERIOD
for any services



FREE PREVENTIVE CARE
when you visit
in-network dentists



NO DEDUCTIBLE
for in-network
services

See a summary of 2021 BCBS FEP Dental benefits below:

Benefits	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	100%	90%	100%	60%
	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	\$50 per person	No deductible	\$75 per person
Annual Maximum Benefits for Class A, B and C Services Does not apply to Class D (Orthodontics)	UNLIMITED MAXIMUM PER PERSON	\$3,000 per person	\$1,500 per person	\$750 per person
Class D (Orthodontic) Services Adults & Children	50% up to \$3,500 lifetime maximum per person	50% 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	



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



Learn more about BCBS FEP Dental

➤ bcbsfedental.com ☎ **1-855-504-2583**
(8 a.m. to 8 p.m. ET, M-F)



Ready to enroll?

➤ BENEFEDS.com ☎ **1-877-888-3337**
(Available 24/7)

FIND YOUR 2021 BCBS FEP DENTAL PREMIUM

1. To find your premium, locate your state and/or ZIP Code in the rating area table 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
CO	Entire state	4	MI	Rest of state	1	PR	Entire area	1
CT	060-063	5	MN	550-551, 553-555, 563	4	RI	Entire state	5
CT	Rest of state	4	MN	Rest of state	3	SC	Entire state	2
DC	Entire area	3	MO	Entire state	1	SD	Entire state	1
DE	Entire state	2	MS	Entire state	1	TN	Entire state	1
FL	330-334, 349	2	MT	Entire state	1	TX	Entire state	1
FL	Rest of state	1	NC	270-274, 278, 280-282, 284-289	2	UT	Entire state	2
GA	Entire state	1	NC	275-277, 283	3	VA	201, 203, 205, 220-227	3
GU	Entire area	1	NC	Rest of state	1	VA	Rest of state	1
HI	Entire state	3	ND	Entire state	5	VI	Entire area	1
IA	500-514, 516, 520-528	3	NE	Entire state	2	VT	Entire state	5
IA	Rest of state	2	NH	030-033, 038	5	WA	980-985	5
ID	Entire state	4	NH	Rest of state	3	WA	Rest of state	4
IL	600-609, 613	2	NJ	070-079, 085-089	4	WI	540	4
IL	612	3	NJ	Rest of state	2	WI	Rest of state	3
IL	Rest of state	1	NM	Entire state	1	WV	254	3
IN	463-464	2	NV	897	5	WV	Rest of state	1
IN	Rest of state	1	NV	Rest of state	2	WY	834	4
KS	664-665, 667-679	2	NY	120-123, 128	3	WY	Rest of state	2
KS	Rest of state	1	NY	005, 100-119, 124-126	4	INTL	International	1
			NY	063	5			

2. Then, match the appropriate rating area to your enrollment type in the premium table at the bottom of the page.

High Option Premiums			
Rating Area	Self Only	Self + One	Self & Family
	MONTHLY	MONTHLY	MONTHLY
1/INTL	\$37.51	\$75.03	\$112.54
2	\$42.03	\$84.00	\$126.01
3	\$45.76	\$91.50	\$137.26
4	\$49.57	\$99.06	\$148.61
5	\$55.47	\$110.87	\$166.34
Standard Option Premiums			
Rating Area	Self Only	Self + One	Self & Family
	MONTHLY	MONTHLY	MONTHLY
1/INTL	\$19.85	\$39.69	\$59.56
2	\$21.75	\$43.53	\$65.28
3	\$24.74	\$49.47	\$74.14
4	\$26.72	\$53.39	\$80.04
5	\$29.51	\$59.04	\$88.55



Download our BCBS FEP Dental app on the App Store® or Google Play™ today. In addition, follow us on our new Facebook and Twitter pages @bcbsfepdental.

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

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