

Blue Value Dental 1 (PPO)

2021 Small Group Offering

- Dental care is important to overall health. That's why our dental plans include essential benefits to ensure members receive complete oral health coverage through our own dental network.
- Blue Value Dental plans have no participation requirements — you can add one to your medical plan or purchase one separately. Groups can choose one Blue Value Dental plan to offer their employees in addition to Blue Pediatric Dental.
- Blue Pediatric Dental benefits and cost-sharing are included in all Blue Value Dental plans.
- Our plan offers flexibility to see out-of-network dentists.*

Adult Benefits	Blue Value Dental 1 (PPO)
Deductible (embedded)	\$50 per member/\$150 family maximum per plan year (combined in- and out-of-network)
Annual benefit maximum	\$750 per member per plan year (combined in- and out-of-network)
Out-of-pocket maximum	N/A
Preventive/diagnostic care (exam, cleaning, X-rays)	\$0 copay per visit
Basic restorative (fillings, extractions, periodontics, endodontics)	50% coinsurance after deductible (combined in- and out-of-network)
Major dental (bridges, crowns, dentures)	50% coinsurance after deductible (combined in- and out-of-network)
Orthodontics	Not covered
Monthly premium Age 26	\$19.03 subscriber
	\$38.06 subscriber and spouse/domestic partner
	\$51.06 subscriber and child(ren)
	\$79.07 family
Monthly premium Age 30	\$19.03 subscriber
	\$38.06 subscriber and spouse/domestic partner
	\$51.21 subscriber and child(ren)
	\$79.31 family

For plan information, please call 1-800-888-1238.

*Participating providers may not balance bill the member. Members have the option to receive dental services from a provider who does not participate in the BlueShield of Northeastern New York contracted network of providers. Out-of-network services are reimbursed at 100% of the in-network fee schedule and the nonparticipating provider may balance bill the member. Visit bsneny.com to see if the dentist is participating in the network or located within our operating area.



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