

## Appendix A

## Dental PPO Plan 1500 For Medicare Supplement subscribers

Effective date July 1, 2024
Plan # DENS01

This appendix is part of your agreement. Keep this with your agreement for your records.

## Monthly dues

## Subscriber

\$56.10

Benefit questions should be directed to:

Blue Shield dental Customer Service at: (888) 679-8928.

Dues billing and benefits questions should be directed to:

Blue Shield Customer Service at: (800) 248-2341.

For the hearing-impaired: 711 (TTY number).