

Effective 1/1/21

Individual and Family

Family Dental plans



A complete plan is a better plan

There's more to good health than eating right, exercising, and getting regular checkups. Taking care of your oral health is just as important. That's why we offer dental plans for you to choose from.

Smile, we've got your dental plan

Protect your smile with one of our PPO or HMO Family Dental plans available through Covered California, and you'll enjoy a range of dental benefits including cleanings and X-rays for \$0. If you have children under age 19, their basic dental and vision needs are covered by the pediatric dental and pediatric vision benefits we include in every individual and family medical plan.

Not sure which plan to choose? We can help. HMO plans generally cost less per month and have lower out-of-pocket costs for services compared to PPO plans. PPO plans, however, offer you more flexibility in your choice of dentists. So, if you value greater choice in dental providers, and you're willing to pay a bit more, a PPO plan may be right for you. If you are more concerned with keeping costs down than having a wider selection of dentists, an HMO plan may be what you are looking for. Visit blueshieldca.com/fad to find a Family Dental PPO or HMO (offered through Covered California) dentist in your area.

Now that you have a high-level view of your choices, compare plan details and plan rates on the next page.

Definitions:

Allowed charges – The dollar amount Blue Shield uses to determine payment for covered services.

Benefits (covered services) – The necessary dental services and supplies covered by the dental plans.

Copayment (copay) – The fixed dollar amount a member pays for benefits after meeting any applicable calendar-year deductible.

Deductible – The amount a member pays each calendar year for most covered services before Blue Shield begins to pay. Specific covered services, such as preventive care, are covered before a member reaches the calendar-year deductible.

Participating provider or network provider – A provider (includes general dentists and dental specialists) that has agreed to contract with Blue Shield to provide covered services to members of a dental plan. A participating, or network, provider has agreed to accept Blue Shield's contracted rate as payment in full for covered services.

Contact your broker, or call a Blue Shield Customer Care Representative at **(855) 836-9705** for more information.

Dental plans	FAMILY DENTAL HMO	FAMILY DENTAL PPO
	Plans available through Covered California	
Monthly rates starting at	\$13.40	\$43.70
Benefit	With participating providers, members pay: ¹	
Diagnostic and preventive services (cleanings, X-rays, and initial and periodic oral examinations)	0%	0% ²
Restorative services – fillings (one surface resin composite, anterior)	\$25	20%
Oral surgery (extraction of erupted tooth or exposed root)	\$65	50% ³
Removal of impacted tooth (complete bony)	\$160	50% ³
Root canal (anterior root canal)	\$200	50% ³
Root canal (molar)	\$300	50% ³
Crowns (full cast high noble metal)	\$300	50% ^{3,4}
Pontic (porcelain fused to high noble metal)	\$300	50% ^{3,4}
Orthodontics	\$350 for under age 19 when medically necessary, not covered for age 19+	50% for under age 19 when medically necessary, not covered for age 19+
Periodontal scaling and root planing (four or more teeth)	\$55	20%
Surgical placement of implant body – endosteal implant	Not covered	Not covered
Denture (full upper or lower)	\$300 for under age 19, \$400 age 19+	50% ³
Calendar-year deductible	\$0	\$75 per individual / \$150 per family for up to age 19, \$50 per individual for age 19+
Calendar-year benefit maximum	None	None for under age 19, \$1,500 per individual age 19+

This chart is an overview of benefits. For additional benefit information including non-network benefits, cost for services, waiting periods, and exclusions and limitations, please see the *Summary of Benefits and Important Legal Information* booklets. To get these documents, call us at **(888) 256-3650**.

* Underwritten by Blue Shield of California Life & Health Insurance Company.

- The amounts indicated are a percentage of the allowed charges. Network providers accept Blue Shield's allowed charges as payment in full for covered services.
- Diagnostic and preventive services do not apply to the calendar-year benefit maximum for this plan.
- There is a six-month waiting period for these services unless you had prior coverage. Contact Member Services at **(888) 271-4880** for more information about obtaining a waiver.
- If precious metals are used, the member will be charged at the dentist's cost. For Dental HMO, porcelain on molar teeth is subject to an additional charge of \$75.

= Benefit is available prior to meeting any deductible.

= Benefit is subject to a deductible.

Blue Shield dental plans available through Covered California

		Rate per member	
Regions	Family Dental PPO	Ages 0 through 18 (rate per child for first 3 children – no cost for 4th child and beyond)*	Age 19+
1, 4, 9, 13-14, 16		\$28.80	\$43.70
2, 5-8, 10-11, 15, 17		\$30.30	\$46.10
3, 12, 18-19		\$32.10	\$48.80

		Rate per member	
Regions	Family Dental HMO [†]	Ages 0 through 18 (rate per child for first 3 children – no cost for 4th child and beyond)*	Age 19+
15-19		\$14.00	\$13.40
3-7, 9		\$15.20	\$14.60
8, 10-11, 13-14		\$16.40	\$15.80
12		\$22.40	\$21.50
2		\$26.20	\$25.20

Please note: Monthly rates for dental plans are in addition to the rates for the medical benefits covered by the Blue Shield health plan.

* A dependent 18 years of age will be charged the age 0-18 rate through the end of the year in which they turn 19, however, that dependent will continue to count toward the three-dependent maximum rate cap until they turn 21.

[†] Family Dental HMO plans are not offered in Region 1. Region 1 is composed of the following counties: Alpine, Amador, Butte, Calaveras, Colusa, Del Norte, Glenn, Humboldt, Lake, Lassen, Mendocino, Modoc, Nevada, Plumas, Shasta, Sierra, Siskiyou, Sutter, Tehama, Trinity, Tuolumne, and Yuba.

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