



# Appendix A

Dental PPO Plan 1500

For Medicare Supplement subscribers

Effective date July 1, 2026

Plan # DENS01

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

## Monthly dues

---

### Subscriber

\$62.30

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).**