



Your Dental Coverage

Your benefits give you convenient access to quality dental services. We offer the largest dental PPO (Preferred Provider Organization) networks in Tennessee. Your network includes:

- › 2,600+ dentists in Tennessee and bordering counties
- › Over 122,000 unique providers across the United States

Pay Less for Your Care

Preventive Screenings Are Good For You

Prevention and early detection lead to better health because they can identify dental problems early before they become more serious. Most of our dental plans cover two exams and two cleanings per year as well as one set of bitewing X-rays.

Networks Stretch Your Benefit Dollar

Even though some dental services cost \$1,000 or more, most dental plans still have an annual maximum benefit of \$1,000. When network dentists discount their fees, you save money.

Check Your Plan Options And Benefits

Review your schedule of benefits in your Evidence of Coverage (EOC)* to see your specific plan option, limits, deductible and coinsurance levels. Not all dental services are covered by these plans. Benefits are arranged in four levels of coverage, A-D.

Note: Services may vary based on your plan or contract. Some plans don't include coverage for all four levels, move services from coverage B to C or have waiting periods.

Coverage A	Diagnostic and preventive services such as exams, cleanings and X-ray
Coverage B	Basic services such as fillings and extractions
Coverage C	Major services such as crowns, bridges and dentures
Coverage D**	Orthodontic services such as braces and retainers

* If your employer's plan is self-funded, please check with your employer for your EOC.

** Services not available in some plans

What Services Are Covered?

We ask dentists to bill their services based on the completion date. If you're eligible on the completion date, benefits will be provided. If you have a treatment in progress and had coverage with a different carrier, please check with your dentist to see which carrier should receive the bill. The billing date determines which carrier should provide coverage.

If you started orthodontic treatment before the date your BlueCross coverage started, file that claim with your previous carrier. However, any orthodontic services (e.g., monthly adjustment fees) you have after your dental coverage starts should be filed with us. We'll apply it to the orthodontic maximum.

Know What We'll Pay

With the exception of emergency care, you and your dentist can determine what your dental plan covers — and the amount we'll pay — before you have treatment. We recommend a prior authorization for any service that may cost more than \$200.

Create an Online Account

See the key details and benefits of your plan at bcbst.com. Log in to your personalized, secure member area at bcbst.com/member.

Your Account Sections

Homepage – View a snapshot of your benefit information, recent claims, programs and support.

Benefits & Coverage – Get full details on what's covered, who's covered and what you pay for services.

Claims & Balances – Check your claims status and details. Print benefit and claims information. View your benefit maximums and more.

Managing Your Health – Create a personal health profile and browse information designed to help you reach your health and wellness goals (may not be available to members of some self-funded groups).

Find Care – Find a dentist in your network, get answers about dental care expenses – even compare costs.

Account – Set up your account profile, including contact preferences, communication channels, messaging alerts and BlueVoice participation.

Find A Dentist (Or Other Provider) In Your Network

- › Using a dentist in your network helps you save money and avoid balance billing
- › Visiting a provider outside your network may cost you more

Look for a new dentist at bcbst.com/finddentalcare. Search for dentists by name or specialty.