

2022 DENTAL COVERAGE SUMMARY



TOGETHER, **WE CAN**
HELP YOU SMILE MORE

bcbsfedental.com



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Why Dental Care is Important

Your oral health is important to your overall health. More than 120 medical conditions present themselves with oral symptoms. Your dentist might be able to detect a health issue before you or even your doctor.

Here are some of the conditions that your dentist can find through an oral exam:

- Human immunodeficiency viruses (HIV)
- Kidney Disease
- Leukemia
- Sexually transmitted diseases (STDs)
- Osteoporosis
- Gastroesophageal reflux disease (GERD)
- Pregnancy & Birth Complications
- Celiac Disease
- Cancer
- Sjogren's Syndrome
- Diabetes
- Anemia
- Colitis



Let's look at some interesting facts

- ✓ People with gum disease may be at a higher risk of osteoporosis.
- ✓ People with severe gum disease have a 3x to 4x higher risk of brain stroke.
- ✓ Gum disease may be linked to Alzheimer's disease and dementia from oral bacteria that is spread through the bloodstream.
- ✓ Several studies show strong evidence linking gum disease with an increased risk of oral cancer and pancreatic cancer.
- ✓ Gum disease can worsen conditions such as chronic obstructive pulmonary disease (COPD). It can also play a role in the contraction of pneumonia, bronchitis and emphysema.
- ✓ People with gum disease are 2x as likely to have heart disease.
- ✓ Nearly 22% of diabetes patients have gum disease.
- ✓ Rheumatoid arthritis patients are 8x more likely to have gum disease.



BCBS FEP Dental Supports all Members

If you have a serious health condition, such as diabetes, heart disease, end-stage renal (kidney) disease, head and neck cancer, a suppressed immune system or are pregnant, we can support your dental health needs.

That's because BCBS FEP Dental covers a wide variety of services, including:

- Periodontal maintenance
- Periodontal scaling/root planing
- Periodontal and oral evaluations
- Palliative treatments
- Fluoride and sealants
- Extensive removal of plaque and tartar buildup (full mouth debridement)

Who We Are

Blue Cross Blue Shield FEP Dental provides comprehensive dental benefits that help you and your family have healthy smiles for years to come. This booklet gives you a closer look at everything our dental plan has to offer.

Let's start with the basics

We have two plan options:



High Option



Standard Option

We have three different enrollment types:



Self Only



Self + One



**Self
& Family**





Who can enroll

BCBS FEP Dental is available to federal employees, retired uniformed service members and their families.



Federal employees

If you're an active or retired federal employee, you're eligible if you currently qualify for the **Federal Employees Health Benefits (FEHB) Program**—even if you're not currently enrolled. You can also enroll your spouse and unmarried children under age 22. Children over 22 who are incapable of support may also be eligible.



Retired uniformed service members

For uniformed service members, most retirees are eligible. You can also cover your spouse and unmarried children who are under 21 if they are not in school. You can cover children in school full-time up to age 23.



Are you eligible?

Learn more about eligibility at [BENEFEDS.com](https://www.bcbsfedental.com).



Why Choose BCBS FEP Dental



We offer free preventive care when you visit in-network dentists.



You have no deductible for in-network services.



You can use all your benefits from day one of your coverage being active.



We offer an unlimited annual benefit under High Option, which means there's no limit to the amount we cover for the year.



Our dental network extends worldwide, meaning your coverage goes where you do.



Members get access to exclusive health and wellness discounts with Blue365®.

How to enroll

You can enroll through BENEFEDS, the portal that eligible participants use to enroll in the Federal Employees Dental and Vision Insurance Program (FEDVIP), during the annual federal health benefits Open Season. The 2021 Open Season is **November 8 through December 13, 2021**. If it's outside of Open Season, you can enroll if you are a new federal employee or are newly retired from the uniformed services. You can also enroll if you have a Qualifying Life Event (QLE), such as a marriage or divorce.

There are two ways to enroll:

- 1 Online at BENEFEDS.com. Go to the "Programs" section of the site and select "Enroll" under Dental and Vision.
- 2 Call **1-877-888-3337** (TTY: 1-877-889-5680)

2022 Benefit Information

Your cost for dental services varies. How much you pay is called your cost share. To figure out what you'll pay, look for your service in the class listing below. More detailed procedure definitions are on [page 19](#).



Dental Care Pricing Tool

Want to know what you'll pay for your dental services before you receive care? Use our new Dental Care Pricing Tool. You can enter your ZIP Code to find estimated dental procedure costs for services in your area. Use it today at bcbsfedental.com/pricetool.

2022 Comparison of Benefits

	High Option		Standard Option	
	You pay			
	IN-NETWORK	OUT-OF-NETWORK	IN-NETWORK	OUT-OF-NETWORK
Class A (Basic) Services e.g., exams, cleanings, X-rays, sealants	Nothing	10%	Nothing	40%
Class B (Intermediate) Services e.g., oral surgery, fillings, gum scaling	30%	40%	45%	60%
Class C (Major) Services e.g., crowns, bridges, implants, root canals, dentures	50%	60%	65%	80%
Annual Deductible for Class A, B and C Services Does not apply to Class D (Orthodontics)	\$0	\$50 per person	\$0	\$75 per person
Class D (Orthodontic) Services Adults & Children	50% up to \$3,500 lifetime maximum per person	50% up to \$3,500 lifetime maximum per person	50% up to \$2,500 lifetime maximum per person	50% up to \$1,250 lifetime maximum per person
Annual Maximum Benefits for Class A, B and C Services Does not apply to Class D (Orthodontics)	Unlimited maximum per person	\$3,000 per person	\$1,500 per person	\$750 per person



New for 2022

Starting healthy habits early promotes a healthy future. Our plan supports all our members, no matter their age. The American Academy of Pediatric Dentistry (AAPD) recommends that your child's first dental visit coincides with their first tooth, which usually comes in between six and twelve months of age. A dentist can check for tooth decay and assess your child's oral growth and development.

That's why under Standard Option, we now cover Class A, B and C in-network services for children age 13 and under at 100%.

Find your BCBS FEP Dental Premium

1. To find your premium, first find your rating area by locating your state and/or ZIP Code.

State	First 3 digits of your ZIP Code	Rating Area	State	First 3 digits of your ZIP Code	Rating Area	State	First 3 digits of your ZIP Code	Rating Area
AK	Entire State	5	KY	Entire state	1	NY	Rest of state	2
AL	Entire state	1	LA	Entire state	1	OH	Entire state	1
AR	Entire state	2	MA	010-011, 013-027, 055	5	OK	Entire state	1
AZ	855, 859-860, 863-865	2	MA	Rest of state	3	OR	970-973	4
AZ	850-853	3	MD	205-212, 214, 216-217	3	OR	Rest of state	2
AZ	Rest of state	1	MD	Rest of state	2	PA	189-196	2
CA	900-908, 910-928, 930-931, 933-935	4	ME	039-042	5	PA	172-174	3
CA	939-952, 954, 956-959	5	ME	Rest of state	2	PA	180-181, 183	4
			MI	480-485	2	PA	Rest of state	1
CA	Rest of state	2	MI	Rest of state	1	PR	Entire area	1
CO	Entire state	4	MN	550-551, 553-555, 563	4	RI	Entire state	5
CT	060-063	5	MN	Rest of state	3	SC	Entire state	2
			MO	726	2			
CT	Rest of state	4	MO	Entire state	1	SD	Entire state	1
DC	Entire area	3	MS	Entire state	1	TN	Entire state	1
DE	Entire state	2	MT	Entire state	1	TX	Entire state	1
FL	330-334, 349	2	NC	270-274, 278, 280-282, 284-289	2	UT	Entire state	2
FL	Rest of state	1	NC	275-277, 283	3	VA	201, 205, 220-227	3
GA	Entire state	1	NC	Rest of state	1	VA	Rest of state	1
GU	Entire area	1	ND	Entire state	5	VI	Entire area	1
HI	Entire state	3	NE	Entire state	2	VT	Entire state	5
IA	500-514, 516, 520-528	3	NH	030-033, 038	5	WA	980-985	5
IA	Rest of state	2	NH	Rest of state	3	WA	Rest of state	4
ID	Entire state	4	NJ	070-079, 085-089	4	WI	540	4
IL	600-609, 613	2	NJ	Rest of state	2	WI	Rest of state	3
IL	612	3	NM	Entire state	1	WV	254	3
IL	Rest of state	1	NV	897	5	WV	Rest of state	1
IN	463-464	2	NV	Rest of state	2	WY	834	4
IN	Rest of state	1	NY	120-123, 128	3	WY	Rest of state	2
KS	664-665, 667-679	2	NY	005, 100-119, 124-126	4	INTL	International	1
KS	Rest of state	1	NY	063	5			

2. Then, match the appropriate rating area to your enrollment type in the premium table at the bottom of the page.

High Option Premiums						
Rating Area	Self Only		Self + One		Self & Family	
	Bi-Weekly	Monthly	Bi-Weekly	Monthly	Bi-Weekly	Monthly
1/INTL	\$18.05	\$39.11	\$36.11	\$78.24	\$54.16	\$117.35
2	\$20.22	\$43.81	\$40.44	\$87.62	\$60.66	\$131.43
3	\$22.01	\$47.69	\$44.03	\$95.40	\$66.04	\$143.09
4	\$23.84	\$51.65	\$47.68	\$103.31	\$71.52	\$154.96
5	\$26.68	\$57.81	\$53.35	\$115.59	\$80.03	\$173.40

Standard Option Premiums						
Rating Area	Self Only		Self + One		Self & Family	
	Bi-Weekly	Monthly	Bi-Weekly	Monthly	Bi-Weekly	Monthly
1/INTL	\$9.22	\$19.98	\$18.44	\$39.95	\$27.67	\$59.95
2	\$10.10	\$21.88	\$20.21	\$43.79	\$30.31	\$65.67
3	\$11.48	\$24.87	\$22.95	\$49.73	\$34.40	\$74.53
4	\$12.39	\$26.85	\$24.76	\$53.65	\$37.12	\$80.43
5	\$13.68	\$29.64	\$27.37	\$59.30	\$41.05	\$88.94



Determining your coverage for services

The information on these pages will give you a better idea of what's covered in each coverage class: A, B, C and D, as well as some general services we cover. Both High Option and Standard Option members have access to these benefits as soon as your enrollment begins. We cover both children and adults for dental care services, except where noted.

Many of these terms are defined in the back of this booklet so you can better understand your coverage. You can also find all these definitions by visiting bcbsfedental.com/dentaldictionary.

General services we cover



Anesthesia services provided alongside covered surgical procedures.



Athletic mouthguards and occlusal guards

Class A: Preventive & Diagnostic Services



Class A covers basic services, including oral exams, prophylaxis, diagnostic evaluations, sealants and X-rays. We cover these services in full at in-network providers.

Under Class A, we cover:

- Up to three cleanings per member each year
- Topical fluoride twice a year for members up to the age of 22
- Sealants for members up to the age of 22
- A range of diagnostic services, such as certain oral evaluations, periodontal evaluations and X-ray films

Class B: Minor Restorative Services

Class B covers intermediate services, including restorative procedures, such as fillings, prefabricated stainless steel crowns, periodontal scaling, tooth extractions and denture adjustments.

Under Class B, we cover:

- Both white and silver fillings
- Re-cementing of an existing crown or post and core
- Prefabricated crowns, when recommended by your dentist
- Endodontic treatment services, including pulp caps, pulpotomy, pulpal therapy and pulpal regeneration
- Periodontal scaling and root planing
- Existing denture care, including adjustments, repairs, adding teeth to an existing removable denture, reline or rebase an existing removable denture, tissue conditioning and re-cementing a fixed partial denture (bridge)
- Oral surgery. A removal of a tooth is an example of oral surgery

Class C: Major Services

Class C covers major services, including endodontic services, such as surgery to remove gingivitis (gingivectomy), major restorative services, such as crowns, oral surgery and bridges and prosthodontic services, such as complete dentures.

Under Class C, we cover:

- Porcelain, ceramic or metal crowns
- Root canals and related services
- Surgical periodontal services (e.g., gingivectomy, gingivoplasty, osseous surgery and some bone and tissue grafts)
- Removable dentures (full and partial) and fixed partial dentures (bridges)
- Implant services, including dental implants, implant-supported denture or bridge and implant repairs

Class D: Orthodontic Services

Under Class D, we cover orthodontics. This includes braces and retainers for both children and adults.

BCBS FEP Dental Provider Network

BCBS FEP Dental members get access to a large, nationwide network with more than 488,000 dental provider points of access.

You have three ways to get the dental care you need:



In-Network Providers

We are a Preferred Provider Organization or PPO. That means we have a network of providers who accept our negotiated rate (allowance) as payment in full for their services. We call these our in-network providers. **We encourage you to use these providers to get the most value from your plan.**



Out-of-Network Providers

You can also visit out-of-network providers. You'll pay a greater percentage of our allowance if you go to an out-of-network provider (e.g., instead of 30% of our allowance, you pay 40% of the allowance). You may also need to pay the difference between what we pay and what the provider charges.



Overseas Providers

Need to see a dentist while in another country? You're covered overseas at the in-network level. You pay the dentist and then submit a claim to us for reimbursement. Use our overseas provider directory to see a list of English-speaking dentists in approximately 100 countries.



You can find an in-network provider three different ways:

- 1 Online at bcbsfepdental.com/findadentist
- 2 Via the BCBS FEP Dental app
- 3 By calling customer service toll-free at **1-855-504-2583** (weekdays 8 a.m. to 8 p.m. ET)

Do you have a dental provider you want to join our network?

You can nominate a provider by either calling customer service or filling out the form at bcbsfepdental.com/findadentist. We'll work to contract with the provider. Please know that this process can take some time.

Combining your Health Insurance Coverage with BCBS FEP Dental

If you have health insurance coverage through the FEHB, your medical insurance must pay their portion first, and then we will pay our portion. This is called **coordination of benefits**. Make sure you share both your FEHB card and your BCBS FEP Dental card at your dental appointment.

How we combine with non-FEHB health insurance

If you have health insurance through a plan that's not part of the FEHB, we will still pay secondary to your medical coverage. If your FEHB plan is administered by a non-BCBS health plan, your claim is sent to that FEHB plan to be processed as the primary carrier. Once the claim finishes processing, you need to file copies of the FEHB plan EOB (explanation of benefits) and the claim to BCBS FEP Dental for processing as the secondary plan.



Let's look at an example of how coordination works:

This assumes you are a High Option member.

Your in-network dentist charges **\$100** for a filling (a Class B service)

Your FEHB plan provides **\$15** in coverage for fillings

Our maximum allowed amount for fillings is **\$60**. Based on our contract with your provider, they'll accept **\$60** as payment in full for their services rather than their rate of **\$100**. We pay **70%** of **\$60** or **\$42**.

That means you pay: $\$60 - \$42 - \$15 =$ **\$3**

What if you're a Blue Cross and Blue Shield Service Benefit Plan member?

If your FEHB plan is the BCBS Service Benefit Plan, both Standard Option and Basic Option include some dental coverage. Your provider should not charge you your Service Benefit Plan cost shares (e.g., the Basic Option \$30 copay for dental cleanings). We cover those amounts.

We will work internally to make sure we make the correct payments.

File your Dental Claims



Filing claims

When you see a Preferred (in-network) provider, you don't need to file a claim—your provider will do it on your behalf. For secondary payment (non-Service Benefit Plan members) or if you go to an out-of-network provider, you will need to submit a paper claim. You can access the form at bcbsfedental.com/claimform or get one mailed to you by calling **1-855-504-BLUE (2583)**. Make sure you follow all the instructions on the form and submit any supporting documents.



Mail completed claim forms to:

BCBS FEP Dental Claims | P.O. Box 75, Minneapolis, MN 55440-0075

Filing claims overseas

Your BCBS FEP Dental plan covers dental care you receive overseas. You should submit your claim and any supporting documents directly to us. You can submit these documents online by logging into your account at bcbsfedental.com.

Alternate Benefits

In some cases, more than one procedure may be available to treat your dental condition. An alternate benefit is when we find that there's a less costly covered benefit that can treat your condition.

In these situations, we will cover the less costly service. If you and your dentist choose to move forward with the more expensive service, you will pay the difference between what we pay and what your provider charges. This could mean unexpected costs for you.

Did you know?

Regular dental cleanings may help prevent other health concerns. It is recommended that cancer patients and organ transplant patients have a dental check-up and all dental work completed before any medical procedure begins. This helps reduce the risk of infection afterwards.

If your dentist recommends dental services to you, you can ask for a **pre-treatment estimate** (also known as a pre-determination of benefits). This will tell you the services we will cover and how much you will pay for them based on your benefit plan. You'll get this before you receive any of the recommended services, so you can ensure they fall within your budget.

We highly recommend getting this estimate. Your dental care provider can submit pre-treatment estimate requests directly to us. For extensive services, we also recommend that your dentist sends us dental X-rays taken before your procedure (called **preoperative radiographs**).

You can also use our new Dental Care Pricing Tool to get out-of-pocket cost estimates directly from bcbsfedental.com/pricetool.



Dental Savings Checklist

Investing in your overall oral health has lifelong benefits. As your dental insurer, your health and well-being are important to us. Here are some tips to help you save on your dental care:



Always take your health insurance and your BCBS FEP Dental member ID cards with you to your dental appointments. This helps make sure your claims get paid properly.



Get annual preventive dental check-ups. Keeping up with your oral health could help prevent more serious issues.



Ask questions. Never be afraid to ask your dentist questions if you don't understand your treatment plan or if you want more information.



Avoid surprise bills by getting a pre-treatment estimate. This can help you know what's covered under your plan.



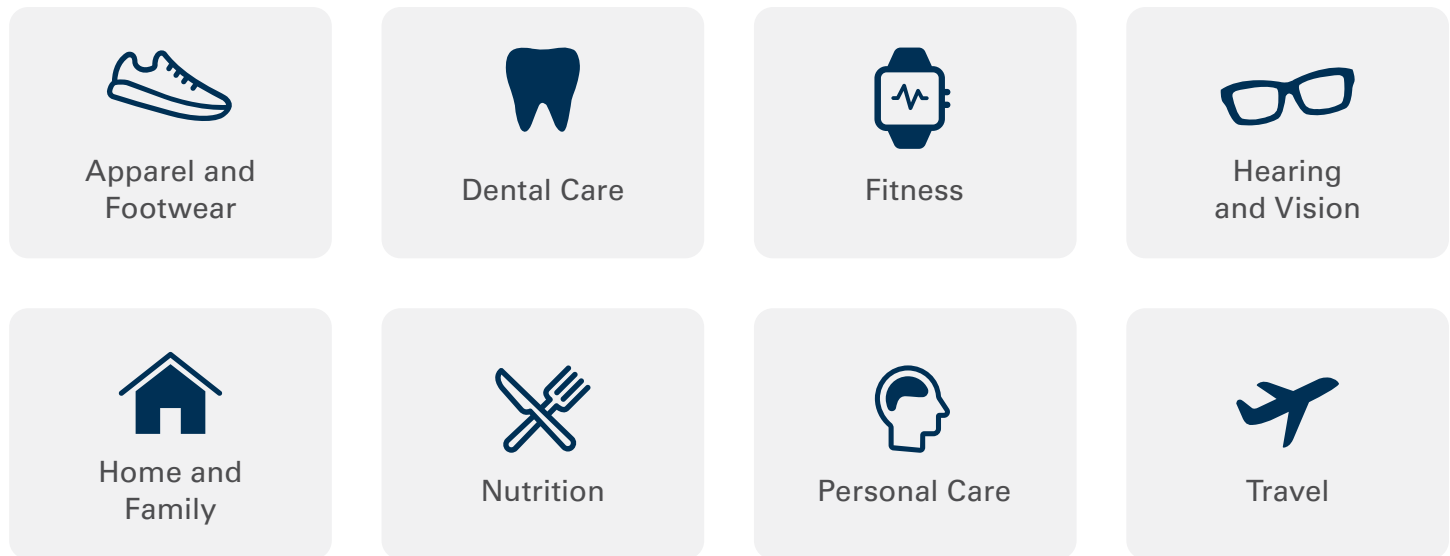
Get a second opinion on your services, when necessary.



Use our Blue365[®] discount program and keep up to date on your benefits by using our interactive tools.

Take Advantage of Blue365®

With BCBS FEP Dental coverage, you have access to exclusive health and wellness deals through the Blue365 program. You can receive discounts related to:



If you sign up to receive emails from Blue365, you'll get deals delivered straight to your inbox. You can also access all the deals online 24/7 at blue365deals.com/fep.

See some of the national retailers we partner with through Blue365:*

Health & Wellness



Fitness

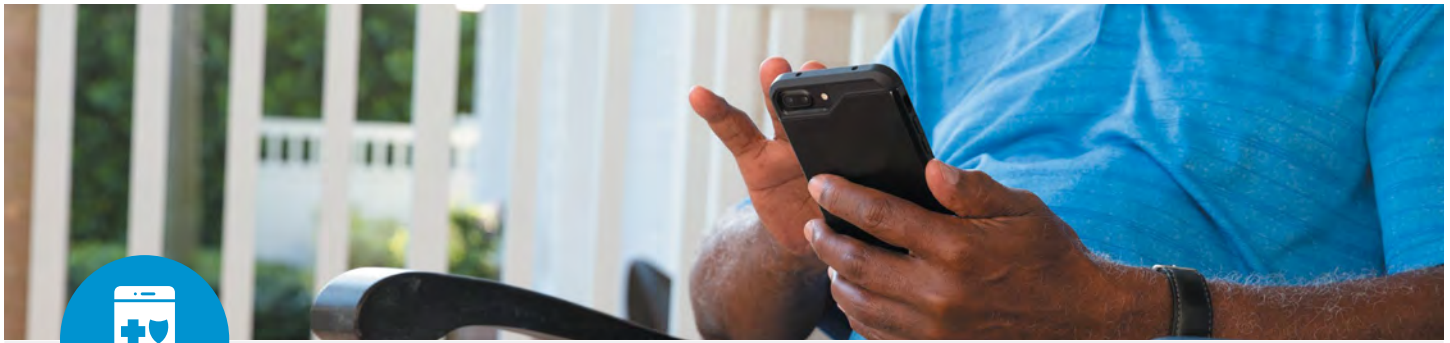


Apparel & Footwear



*Retailers are subject to change at any time. Always see the most up-to-date list at blue365deals.com/fep.

Introducing the BCBS FEP Dental App



The BCBS FEP Dental mobile app keeps your dental care coverage at your fingertips. You can download it today on the App Store® or Google Play™.

With the app, you can*:



Use dentist search tools to find in-network providers with ease. Search using your current location or specify another region to search. You can also save clinics to your personal favorites list.



See your benefit, coverage and claims information on the go. View your plan type, benefit levels, deductibles and maximums. Check the status of your family's most recent dental claims.



View your digital member ID card. Show your member ID card at the dentist's office without getting out your wallet. You can also email your member ID card right from the app.



Use the Premium Finder. Dental plan premium costs are based on where you live. Find yours with our easy-to-use tool.



Find an event. Look for upcoming virtual and in-person events to learn more about dental health and coverage.



And much more. Nominate a provider, use our interactive tooth brushing timer, access international services, contact us right from your app and more.

Stay tuned for more **new features** in the future as we make your dental information even easier to access.

**You must register for a BCBS FEP Dental account to access many of the app's features.*

Other Tools and Resources

AskBlueSM BCBS FEP Dental Plan Finder

Need help deciding if High Option or Standard Option is the right fit for you? Use our simple product selection tool to get a plan recommendation based on your dental care needs. It only takes a few minutes. Access the tool today at askblue.bcbsfedental.com or via the BCBS FEP Dental app.

Find a Dental Provider

Use our Find a Provider tool to find an in-network dentist with ease. Search using your current location or specify another region to search. You can also save locations to your favorites list. Find a dentist today at bcbsfedental.com/findadentist or via the BCBS FEP Dental app.

BCBS FEP Dental Premium Finder

Want to quickly find out your bi-weekly or monthly premium? Enter your ZIP Code into our premium finder and you'll get the High and Standard Option premiums for your rating area. Use the tool at bcbsfedental.com/premiumfinder.

Dental Care Pricing Tool



Find estimated out-of-pocket costs for your dental treatments based on where you live—all you need is your ZIP Code. Use the tool today at bcbsfedental.com/pricetool.



There's more to do and discover on our website at bcbsfedental.com

Stay up to date on the latest dental health topics, see your full benefit brochure, register to see claims information and more. We also encourage you to follow us on Facebook and Twitter [@bcbsfedental](https://twitter.com/bcbsfedental).

Helpful Dental Care Definitions

Here are some terms that you may see associated with your dental care coverage. For more definitions go to bcbsfedental.com/dentaldictionary.

Caries

More commonly known as tooth decay, these are caused by a breakdown of the tooth enamel. This is the result of bacteria on teeth that break down foods and produce acid that destroys tooth enamel and results in tooth decay.

Coinsurance

Your share of the costs of a covered healthcare service, calculated as a percentage (for example, 20%) of our allowance for the service. You pay coinsurance plus any deductibles you owe. For example, if our allowance for an office visit is \$100 and you've met your deductible, your coinsurance payment of 20% would be \$20. We pay the rest of the allowed amount.

Deductible

The amount you owe for covered healthcare services before we begin to pay. For example, if your deductible is \$50, we won't pay our portion of your service until you've met that amount. The deductible does not apply to all services.

Fluoride

Fluoride is commonly used in dentistry to strengthen the outer layer of your teeth (enamel) and helps to prevent cavities. It's also added in small amounts to public water supplies in the U.S. and many other countries. This process is called water fluoridation.

In-network dental providers

We have a network of dental providers who accept our allowance as payment in full for dental services. Our dental network includes access to more than 488,000 provider points of access nationwide.

Lifetime maximum coverage

Lifetime maximum is the maximum dollar amount a dental plan will pay toward the cost of orthodontic dental services for an individual's lifetime.

Maximum annual coverage

An annual maximum is the most a dental plan will pay toward the cost of dental services within a specific period, usually a calendar year. If your annual maximum is \$1,500, we will pay our portion of your bill(s) up to that amount for any covered dental services received that year.

Open Season

All actively working or retired federal employees and eligible uniformed service members can enroll in, change or cancel their dental plan during Open Season. It's the second Monday of November through the second Monday of December each year.

Orthodontic services

Orthodontic services include things like braces, retainers and other specialty dental treatments to help straighten teeth. We cover both children and adults.

Out-of-network dental providers

When you go to a dental provider who doesn't have a contract with us, they're out-of-network. If you choose to see an out-of-network dental provider, your out-of-pocket costs will be higher.

Periodontal Evaluations

A comprehensive periodontal evaluation is an annual oral check-up to examine your teeth, gums, bite, plaque, and risk factors and check for any signs of oral diseases or development of diseases.

Periodontal Scaling

This is when your dentist removes all the plaque and tartar (hardened plaque) above and below the gum line, making sure to clean all the way down to the bottom of the pocket.

Premium

Your premium is the specific amount you're responsible for paying to your dental plan in exchange for coverage.

Prophylaxis

This is when a dentist or the dental hygienist performs a cleaning of the teeth such as removing plaque so that the individual does not get mouth diseases such as gingivitis.

Pulp caps

Direct pulp cap is one of two kinds of pulp capping. In direct pulp capping, the dentist exposes and removes all of the cavity in the tooth and instantly covers the pulp with a disinfecting agent.

An indirect pulp cap is a procedure to prevent an exposed tooth pulp from becoming inflamed due to exposure. It is a type of sedative placed on top of a thin layer of dentin.

Pulpal Regeneration

This is used to restore diseased or damaged dental pulp and to assist in healing.

Pulpal Therapy

This is a pediatric dental treatment used to treat and preserve a child's natural tooth that has been affected by an injury or tooth decay.

Pulpotomy

Removal of a portion of the pulp, including the diseased aspect, with the intent of maintaining the vitality of the remaining pulpal tissue by means of a therapeutic dressing.

Qualifying Life Event

You might be able to change your dental plan outside of Open Season if you have a qualifying life event (QLE). These include getting married, having a baby, getting divorced or a change in employee status.

Root planing

This is a procedure that smooths out your teeth roots to help your gums reattach to your teeth.

Sealants

Dental sealants are thin coatings that when painted on the chewing surfaces of the back teeth (molars) can prevent cavities (tooth decay) for many years. Sealants protect the chewing surfaces from cavities by covering them with a protective shield that blocks out germs and food.

Unexpected dental needs

Any dental issues or concerns that are not planned, including tooth aches, bleeding gums, tooth falling out, sensitive tooth, crown or filling falling out, mouth pain, chipped or cracked tooth, cavity, impacted tooth, clenching or grinding of teeth and wisdom teeth problems.

Unlimited coverage

Unlike annual maximum, unlimited coverage does not have a maximum dollar amount a dental plan will pay toward the cost of dental services within a specific period. High Option has unlimited coverage.



VISIT US ONLINE

Visit bcbsfedental.com to discover everything BCBS FEP Dental has to offer.



CONTACT US

1-855-504-BLUE (2583) (TTY: Dial 711), 8 a.m. - 8 p.m. ET Monday - Friday



ENROLL

BENEFEDS.com | **1-877-888-3337**



**BlueCross
BlueShield** | FEP DentalSM



Stay connected to [bcbsfedental](https://bcbsfedental.com)



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This is a summary of the many features and benefits of BCBS FEP DentalSM. For a complete description, please view the benefit brochure.

The Blue Cross Blue Shield Association is an association of independent, locally operated Blue Cross and Blue Shield companies.

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BLUDENEXT2022