

2017 Dental Plan Highlights

Choose the benefits that meet your needs.

Direct Basic

The coverage you need for regular checkups at less than \$1 a day

This low-cost plan works for you if you have a healthy mouth and just need regular checkups. It costs less than \$1 a day per person.

Direct Standard

Coverage for regular checkups and additional minor services you might need

This affordable plan is your best choice if you have a generally healthy mouth but might need minor services beyond checkups.

Direct Plus

Comprehensive coverage combined with a higher maximum limit

Our mid-range plan is a good fit if you want to balance comprehensive coverage with a monthly payment that is still affordable.

Direct Elite

Comprehensive coverage, higher benefit levels, and our highest maximum limit

This plan is a good choice if you think you might need more significant work done. It combines higher benefit levels with our highest maximum limit each year.

These plans are all Qualified Dental Plans that meet ACA guidelines for pediatric dental coverage.

We're Here—Right Here in Rhode Island—to Help

We're happy to talk to you about your dental needs to make sure you've chosen the plan that is right for you.

3 Ways to Enroll

Online

- bcbsri.com/dental

On the phone

Call for assistance and an enrollment form.

- (401) 459-5550
- 1-855-690-2583 (myOblue)
- 711 (TTY users)

In person at Your Blue StoreSM

- **East Providence** – 71 Highland Avenue (Highland Commons)
- **Lincoln** – 622 George Washington Highway (Lincoln Mall Shopping Center)
- **Warwick** – 300 Quaker Lane (Cowesett Corners)

Blue Cross & Blue Shield of Rhode Island complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex.

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-800-639-2227.

ATENÇÃO: Se fala português, encontram-se disponíveis serviços linguísticos, grátis. Ligue para 1-800-639-2227.



www.bcbsri.com

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Blue Cross & Blue Shield of Rhode Island is an independent licensee of the Blue Cross and Blue Shield Association.

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2017 Dental Direct Plans



It takes a team

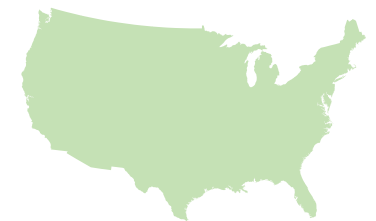


2017 RATES INSIDE

Relax...we can help you choose the dental plan that's right for you.

First, we want to say thanks for considering Blue Cross Dental Direct! For more than 35 years, Rhode Islanders like you have trusted us for dental coverage. Start by viewing the benefits we offer across our four plans. If you still aren't sure which one is best for you, just ask. We're here—right here in Rhode Island—to help.

WITH OUR NATIONAL COVERAGE COAST-TO-COAST, YOU CAN VISIT MORE THAN **100,000 DENTISTS** AT MORE THAN **334,000 LOCATIONS.**



ALL PLANS INCLUDE OUR EXTENSIVE NETWORK, **9 OUT OF EVERY 10 DENTISTS** RIGHT HERE IN RHODE ISLAND.

Blue Cross Dental also provides coverage for out-of-network care.



2017 Blue Cross Dental

All our plans cover you in- and out-of-network coast-to-coast and include pediatric dental benefits.

Benefits	Direct Basic	Direct Standard	Direct Plus	Direct Elite
Calendar year maximum	\$1,000	\$1,000	\$1,500	\$2,000
Dependent coverage up to age	26	26	26	26
Deductible	\$0	\$0	\$0	\$50
Diagnostic and preventive services				
Oral exam, bitewing X-rays, complete X-ray series, single X-rays, and cleanings	100%	100%	100%	100%
Palliative treatment	50%	60%	100%	100%
Basic services				
Fillings	50%	60%	80%	80% after deductible
Simple extractions	Not covered	60%	80%	80% after deductible
Denture repairs, adjustments, relines, and rebasing	Not covered	50%*	50%*	80% after deductible*
Root canal therapy	Not covered	60%**	50%**	80% after deductible**
Non-surgical periodontics	Not covered	Not covered	50%**	80% after deductible**
Surgical periodontics	Not covered	Not covered	50%**	50% after deductible**
Oral surgery and general anesthesia	Not covered	60%**	50%**	80% after deductible**
Major services				
Crowns and onlays	Not covered	Not covered	50%**	50% after deductible**
Fixed bridges, partial and complete dentures, and single tooth implant	Not covered	Not covered	50%**	50% after deductible**
Oral appliances				
Night guards	50%	50%	50%	50%

All plans are Qualified Dental Plans that meet the Healthcare Reform guidelines for pediatric dental coverage. Please see next page for more information.

* 6-month waiting period applies, which means that these services are available once your policy has been in effect for 6 continuous months.

** 12-month waiting period applies, which means that these services are available once your policy has been in effect for 12 continuous months.

This is a summary of benefits. It is not a contract. For details about coverage, including any limits and exclusions not noted here, please call our Sales Department at 1-855-690-2583 or refer to the dental plan's subscriber agreement online at bcbsri.com/dental.

2017 Blue Cross Dental Direct Monthly Rates

Rates are determined per individual. The premium rate for family coverage is based on the number of individuals in the family that enroll in coverage and the age of each family member. If you have children covered under the plan, you will only pay a premium for up to three children under the age of 21.

Age	Direct Basic	Direct Standard	Direct Plus	Direct Elite
0-18	\$24.36	\$24.36	\$34.89	\$34.89
19-29	\$16.85	\$22.48	\$34.83	\$48.27
30-39	\$16.85	\$22.48	\$34.83	\$48.27
40-49	\$16.85	\$22.48	\$34.83	\$48.27
50-59	\$18.53	\$24.73	\$38.32	\$53.10
60 +	\$21.06	\$28.10	\$43.54	\$60.34

Benefits for Dependents Under Age 19

2017 Pediatric Dental Benefit Highlights

Benefits	Direct Basic & Direct Standard		Direct Plus & Direct Elite
	In-network/out-of-pocket maximum	\$350 Individual / \$700 Family	
Pediatric benefit coverage	Up to age 19		
Deductible	\$75 per person	\$25 per person	
Oral exams, cleanings*, X-rays, fluoride treatments, space maintainers, and sealants	100%		
Palliative treatment	80% after deductible		
Fillings	50% after deductible		
Simple extractions, partial/denture repairs, relines and rebasing, periodontal treatments, root canals, oral surgery, crowns, and prosthodontics	30% after deductible	50% after deductible	
Orthodontics (medically necessary only)	50% after deductible		
Night guards	50%		

*No waiting period for pediatric dental benefits.
*Cleanings: Direct Basic & Direct Standard 2/year,
Direct Plus & Direct Elite 3/year*



Don't brush off dental care

\$1 on prevention saves as much as \$50 in future costs!*



Studies show that regular checkups and cleanings may reduce your risk of heart disease and stroke, and help you and your dentist identify health risks like diabetes and other serious conditions at an early stage.

**The American Dental Hygienists' Association*

Need a dentist?

Use our Find a Doctor tool on bcbsri.com to see if your family dentist is in our network or to find a dentist who is convenient for you.

Over half of American children will be affected by tooth decay before age 5.*

And children lose 52 million school hours per year due to dental problems. To keep their teeth healthy, your child should visit the dentist for a cleaning TWO times a year, and they should brush and floss TWO times a day for TWO whole minutes!

**American Academy of Pediatric Dentistry*

Brush TWO minutes



twice a day for healthy teeth