Blue Cross **Dental**,

Smile! We have the right dental plan for you.

When you choose one of our Dental Direct plans, you'll have access to almost 90 percent of practicing dentists in Rhode Island, and you'll also have the option to see dentists who are not in our network.

- Blue Cross Dental Direct Plus offers the highest annual limit for services of any dental plan offered in Rhode Island.
- Blue Cross Dental Direct Essential provides well-rounded coverage with many services covered at 100 percent.
- Blue Cross Dental Direct Basic gives you preventive and basic benefits at a great value.

All three of our Dental Direct plans include Pediatric benefits. For additional information, please reference page 3 of this brochure.

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No matter which plan you choose you'll have:

- No deductible
- No application fee
- No annual membership fee

You'll also get comprehensive benefits that cover:

- Annual checkups, X-rays, cleanings, sealants
- Fillings, root canals, extractions, denture repairs
- Night guards and more

Have questions? Let's talk it out!

Call one of our sales representatives today at (401)-459-5550 or (855)-690-2583 (myOblue). TTY/TDD (Telecommunication Device for the Deaf) users should call 711.



2014 Plan Highlights

The chart below will help you choose the coverage and benefits that meet your needs.

2014 Blue Cross Dental Direct Plans				
BENEFITS	Basic	Essential	Plus	
Calendar Year Maximum (resets every Jan. 1)	\$1,000	\$1,000	\$1,750	
Deductible	no deductible	no deductible	no deductible	
Dependent Coverage	19	19	19	
Diagnostic and Preventive Services				
Oral exam, bitewing X-rays, complete X-ray series, single X-rays, cleanings, fluoride treatments, and sealants	100%	100%	100%	
Space maintainers	50%	80%	80%	
Basic Services				
Fillings, palliative treatment (treatment to relieve acute pain), repairs to existing partial or complete dentures, rebasing or relining of partial or complete dentures, and simple extractions	50%	80%	80%	
Recementing crowns or bridges	50%	80%	80%	
Major Restorative Services*				
Crowns over natural teeth, build ups, and post and cores	not covered	50%	50%	
Endodontic Services				
Root canal therapy	50%	80%	80%	
Non-Surgical Periodontal Services				
Periodontal maintenance following active therapy, root planing, and scaling	50%	80%	80%	
Surgical Periodontal Services*				
Osseous (bone surgery), soft tissue grafts, crown lengthening, and guided tissue regeneration	not covered	50%	50%	
Prosthodontic Services*				
Bridges, build ups, posts and cores with a fixed bridge, partial and complete dentures, and single tooth implant	not covered	not covered	50%	
Oral Surgery Services				
Extractions and other routine oral surgery when not covered by your medical plan, general anesthesia or intravenous sedation for certain surgical procedures	50%	80%	80%	
Oral Appliances				
Night guards	50%	50%	50%	
Pediatric benefits are included with all three Blue Cross Dental Dire	ct Plans. Please see	page 3 for more inj	formation.	

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

Don't Brush Off Dental Care

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.



2014 Blue Cross Dental Direct Monthly Rates

Pates are effective January 1 2014 through December 31 2014

Rates are effective january 1, 2014 tinough Detember 51, 2014.				
Age	Blue Cross Dental Direct Basic	Blue Cross Dental Direct Essential	Blue Cross Dental Direct Plus	
0-18	\$26.20	\$26.20	\$26.20	
19-29	\$20.64	\$29.44	\$40.59	
30-39	\$21.87	\$31.20	\$43.03	
40-49	\$22.70	\$32.38	\$44.65	
50-59	\$25.79	\$36.80	\$50.74	
60+	\$28.89	\$41.21	\$56.83	

t Highlights (applies to Dependents up to age 19)					
BENEFITS					
	\$700 Individual/\$1,400 Family				
	no deductible				
	Up to age 19				
	100%				
X-rays	100%				
	50%				
in), repairs to existing or complete dentures,	500/				
or complete delitures,	50%				
	50%				
	50 /0				
	50%				
	50%				
ning, and scaling	50%				
ning, and guided	50%				
	30 //				
l and complete dentures,	50%				
y your medical plan,					
procedures	50%				
	50%				
	50%				
for nediatric dental henefits					

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 and they are covered under the plan, you will only pay premium for three children under the age of 19.

In Just Three Simple Steps You Can Get the Dental Care You Need!

Step 1: Choose the plan that's right for you.

- Step 2: Complete the enclosed application and send it to Blue Cross & Blue Shield of Rhode Island, along with your 1st month's premium.
- **Step 3**: Schedule your first checkup once your benefits become active.



Additional Resources at Your Fingertips

Once you become a member, register on **BCBSRI.com** to take advantage of our:



 Fitness Discount Program – where you'll get discounts on gym memberships at more than 75 fitness centers in Rhode Island and a 10 percent discount on certain fitness equipment from Sears.



 Blue365sm – a program that offers savings on products and services from leading national companies, including Jenny Craig[®], Reebok, and many more.



 Health Center – where you'll find more than 7,000 articles and interactive tools that can help you take the best care of yourself.



www.bcbsri.com

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