

BlueDental Plus Summary of Benefits

Harford County Public Schools

PPO Standard—Includes access to a national provider network

	In-Network You Pay	Out-of-Network You Pay
DEDUCTIBLE APPLIES TO ALL BASIC AND MAJOR SERVICES*	\$25 Individual/ \$50 Family	\$25 Individual/ \$50 Family
ANNUAL MAXIMUM APPLIES TO ALL BASIC AND MAJOR SERVICES*	Plan pays \$1,500 maximum	
PREVENTIVE & DIAGNOSTIC SERVICES (Deductible and Annual Maximum do not apply)		
<ul style="list-style-type: none"> ■ Oral Exams ■ Cleanings ■ X-rays ■ Sealants 	No charge ¹	Deductible does not apply; Non-participating providers may bill for the difference between the allowed benefit and the provider's charges. ¹
BASIC SERVICES		
<ul style="list-style-type: none"> ■ Fillings (includes posterior composite restorations) ■ Endodontics (root canals) ■ Oral surgery ■ Stainless steel crowns 	No charge after deductible ¹	Deductible applies; Non-participating providers may bill for the difference between the allowed benefit and the provider's charges. ¹
MAJOR SERVICES (NOT COVERED UNDER PLAN)		
<ul style="list-style-type: none"> ■ Periodontics ■ Crowns ■ Inlays ■ Onlays ■ Cast restorations ■ Bridges ■ Dentures 	Not covered	Not covered

¹ CareFirst payments are based on the CareFirst Allowed Benefit. Participating and Preferred Dentists accept 100% of the CareFirst Allowed Benefit as payment in full for covered services. Non-participating dentists may bill the member for the difference between the Allowed Benefit and their charges.

* Deductible and Annual Maximum Combined In-network/Out-of-network.

Summary of Exclusions: Not all services and procedures are covered by your benefits contract. This plan summary is for comparison purposes only and does not create rights not given through the benefit plan.

CareFirst of Maryland, Inc.: CFMI/BLUEDENTAL EOC (1/15); CFMI/BLUEDENTAL DOCS (R.7/21); CFMI/BLUEDENTAL SOB (R.7/21); CFMI/51+/GC (R. 1/13); CFMI/ELIG/D-V (7/09) and any amendments.

BlueDental Plus Summary of Benefits

Our plusses

- Most plans cover 100% of preventive and diagnostic services
- No claim forms or paperwork to fill out when a member sees a participating dentist
- We coordinate benefits for members with dental coverage from another carrier
- More than 123,000 participating dentists and specialists across the United States.

Our plans

With BlueDental Plus, you'll save the most money by seeing a participating provider.

What's a participating provider?

It's a dentist or specialist who is in our network and accepts our reduced negotiated fees as payment in full. This means no balance for you to pay, keeping your out-of-pocket costs low.

- **Option 1**—By choosing a dentist in the Preferred Provider Network, you pay the lowest out-of-pocket costs. These dentists accept CareFirst's allowed benefit as payment in full. You're only responsible for deductibles and coinsurance. And for your convenience, your provider is reimbursed directly.
- **Option 2**—By choosing a dentist who participates with CareFirst, but not through the Preferred Provider Network, you'll pay slightly higher out-of-pocket costs. Similar to Option 1, there is no balance to pay. You're still responsible for deductibles and coinsurance, and have the convenience of your provider being reimbursed directly.

Can I see a non-participating provider?

Of course. But your out-of-pocket expenses will be highest with providers outside our network. You may have to pay the difference between the dentist's fee and what your plan allows for those services.

Where can I find a dentist?

Visit carefirst.com/doctor and select *BlueDental* to view in-network providers.

When do I get my ID card?

Member ID cards are mailed to your home after enrollment. You can also access your ID card—along with other claims and benefit information—at *My Account* or on the CareFirst mobile app. Visit carefirst.com/myaccount to register.

Who can I call with questions about my dental plan?

Call Dental Customer Service toll free at 866-891-2802 between 8 a.m. and 6 p.m. ET, Monday–Friday.

Common dental insurance terms

Deductible: The amount you are responsible for before CareFirst pays for dental services.

Family deductible: A deductible that is satisfied by the combined expenses of all covered family members. For example, a plan with a \$25 deductible may be limited to a maximum of three deductibles (\$75 per family) regardless of the number of family members.

Coinsurance: Your share of the dentist's fee after CareFirst has paid its share.

Annual maximum: The yearly reimbursement level for an individual/family set by your CareFirst dental plan.