



BlueCross BlueShield
of Illinois



BlueCare Dental PPOSM

BlueCare Dental PPO offers you and your family access to one of the largest national dental PPO networks¹. This network includes general and specialty dentists in Illinois as well as across the country. As a BlueCare Dental PPO plan member, you can go to any dentist. However, you'll save money and get more from your benefits when you use an in-network dentist. These in-network dentists have agreed to:

- Accept set fees for covered services
- Not bill you for costs over the negotiated fees (except copayments, coinsurance and deductibles)

You can choose an out-of-network dentist, but he or she may have higher fees and charge you for amounts not covered by your insurance.

Finding an In-Network Dentist is Easy

For a list of in-network general and specialty dentists, go to bcbsil.com and use the Provider Finder[®] tool. You can search for a dentist near your home, school or office and easily download a map with driving directions.

BlueCare Dental ConnectionSM

As an enhanced service, Blue Cross and Blue Shield of Illinois (BCBSIL) offers BlueCare Dental Connection. This service provides educational information and other resources to help you make choices about your dental care — at no extra cost.

To help you learn about good oral health, BlueCare Dental Connection offers:

- Educational mailings
- 24-hour online access to the Dental Wellness Center,^{*} which offers educational articles and special tools

The Dental Wellness Center allows you to:

- Ask dental-related questions through [Ask a Dentist^{*}](#)
- Find an in-network dentist using [Provider Finder](#)
- Research dental fees in your area with the [Dental Cost Advisor^{*}](#)
- Search the [Dental Dictionary^{*}](#) of common clinical terms
- View animations on different dental topics in the [Treatment and Procedure^{*}](#) tool

To access the Dental Wellness Center, log in to Blue Access for MembersSM at bcbsil.com and click on the [My Health](#) tab.

Dedicated to Customer Service

After signing up, you will get more detailed information about your dental plan. Look at your plan materials for complete details. Customer Service can answer questions about eligibility, claims, benefits and providers. Just call **800-367-6401** between 8 a.m. and 6 p.m. (CT), Monday through Friday. In addition, you can find general benefit information at bcbsil.com.

¹ Dental Network of America, LLC. (DNoA), a separate company and the network manager providing access to the national network. Source: Netminder, February 2015

^{*} The Dental Wellness Center, Dental Cost Advisor, Ask a Dentist, Dental Dictionary and Treatment and Procedure are provided by DNoA, a separate company that acts as the administrator of Blue Cross and Blue Shield of Illinois dental programs. DNoA is solely responsible for the products or services it offers. BCBSIL assumes no liability or responsibility for damage or injury to persons or property arising from the use of any product, information, idea or instruction mentioned in DNoA's content.



BlueCare Dental PPOSM Network Advantage



Your BlueCare Dental PPO plan provides access to a network of dentists who agree to discount their fees for members. You have the option to choose any dentist, but there are cost advantages to choosing a dentist who participates in the BlueCare Dental PPO network.



Savings

Discounts of 20 percent to 40 percent are available to BlueCare Dental PPO members. Save money each time you utilize a network dentist.

There is no balance billing when using a network dentist. You are not billed for costs exceeding the allowable amount (except copayments, coinsurances and deductibles).



Convenience

You will have access to one of the largest dental PPO networks in the country. To locate the participating dentists in your area, visit Provider Finder[®].

You also get the freedom to choose any general dentist or specialist in the network without a referral.



Quality

You can take comfort in knowing that professional credentials are verified for every PPO dentist.

PPO Savings Example:



PPO DENTIST
Crown (D2752)



NON-PPO DENTIST
Crown (D2752)

Billed Charge

\$ 1,026.00

\$ 1,026.00

Allowable Amount

\$ 749.00

\$ 1,026.00

Dental Plan pays 50%

\$ 374.50

\$ 513.00

Member's Responsibility

\$ 374.50

\$ 513.00

The dollar amount shown is for illustrative purposes only. Check your benefit booklet for deductible, coinsurance and dollar maximums that may apply.

How do I find a PPO Dentist?



Visit bcbsil.com and use the Provider Finder tool.



Call Customer Service toll-free at 800-367-6401.

Joliet Public School District #86

The following is a listing of common services available through your BlueCare Dental PPO network. The member's share of the cost is determined by whether care is received from a contracting or non-contracting provider. This information only provides highlights of this program. Please refer to the BlueCare Dental Certificate for additional benefit information.

BENEFIT HIGHLIGHTS

Program Basics

Contracting Provider*

Non-Contracting Provider*

Benefit Period Maximum

\$1,000 per benefit period

Deductible

\$25 per person per benefit period
\$75 maximum per family

Dependent Coverage

Spouse and unmarried dependents up to age 26, if eligible

Services

Diagnostic & Preventive Services

Dental exams
Cleanings
X-rays
Fluoride treatment

100% of Maximum Allowance

100% of Usual and Customary

Miscellaneous Services

Sealants
Space maintainers
Labs & Tests

100% of Maximum Allowance

100% of Usual and Customary

Emergency Care

Treatment for the relief of pain

100% of Maximum Allowance

100% of Usual and Customary

Restorative Services

Routine fillings (amalgams and resins)
Pin retention
Simple extractions

100% of Maximum Allowance
after deductible

100% of Usual and Customary
after deductible

General Services

Intravenous sedation
General anesthesia
Stainless steel crowns

50% of Maximum Allowance
after deductible

50% of Usual and Customary
after deductible

Endodontic Services

Root canals
Pulp caps
Apicoectomy / apexification

100% of Maximum Allowance
after deductible

100% of Usual and Customary
after deductible

Periodontic Services

Scaling & root planning
Gingivectomy / gingivoplasty
Osseous surgery

100% of Maximum Allowance
after deductible

100% of Usual and Customary
after deductible

Oral Surgery Services

Surgical extractions
Alveoloplasty
Vestibuloplasty

50% of Maximum Allowance
after deductible

50% of Usual and Customary
after deductible

Crowns, Inlays / Onlays Services

Crowns
Inlays / onlays
Prefabricated posts and cores
Repair and recementation of crown, inlays / onlays

50% of Maximum Allowance
after deductible

50% of Usual and Customary
after deductible

Prosthodontic Services

Bridges and dentures
Reline / rebase of dentures
Addition of tooth or clasp
Repair of bridges and dentures

50% of Maximum Allowance
after deductible

50% of Usual and Customary
after deductible

Orthodontics

Not Covered

Not covered

Not covered

* Schedule of Maximum Allowances

Contracting providers have agreed to accept the Schedule of Maximum Allowances as payment in full for covered services. Non-contracting providers do not accept the Schedule of Maximum Allowances as payment in full. For services received from a non-contracting provider, member will be liable for the difference between the dentist's charge and covered benefits.

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