

Blue Select Dental plans

When it comes to maintaining overall health and wellbeing, taking care of your teeth is just as important as taking care of the rest of your body. With an emphasis on no-cost preventive care, our dental plans help you maintain complete oral health, reducing the need for more costly dental care in the future. And at the same time, helping you to minimize pain and anxiety, eat and sleep without disruption, boost self-confidence, and have an overall better quality of life. **Now that is something to smile about.**

How it works:

All plans come with a deductible, which means that for some services, you are responsible for the costs up to that amount. Once you have met your deductible, the plan starts contributing.

- With Blue Select Dental and Blue Select Premier Dental, diagnostic and preventive services are covered in full and not subject to the deductible.
- For all other covered services, you are responsible for paying a percentage of the cost, called coinsurance.
- To limit your costs each year, the pediatric benefits come with an out-of-pocket maximum (OOPM).
- In order to enroll in the Blue Select **Standard Adult** Dental plan, members must be enrolled in a Qualified Health Plan.
- How the money you pay toward the deductible adds up (or aggregates):
 - » When only covering yourself, you will pay the single deductible amount. When covering more than one person, the family deductible is met for everyone on the plan when one or any combination of members reaches the family deductible amount.
 - » Once you meet your deductible, the plan begins paying on your claims and you are only responsible for a percentage of costs, called coinsurance.

Waiting periods:

- There is no waiting period for pediatric benefits (up to age 19). For adult benefits (age 19 and older), there are no waiting periods on diagnostic, preventive, or basic services. Major services are subject to a 12-month waiting period on off exchange Blue Select Dental and Blue Select Premier Dental plans. Waiting periods may be waived with proof of prior dental coverage upon enrollment.

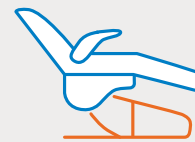


Find a Dentist tool

Use our Find a Dentist tool to find one near you with whom you feel comfortable.

ExcellusBCBS.com/FindADentist

Comprehensive coverage gives you the confidence you need to get care when you need it:



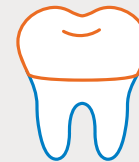
Cleanings and exams



Routine x-rays



Fillings



Select crowns*



Dentures*



Endodontics and periodontics

Excellus  **Everybody Benefits**

* Subject to 12-month waiting period for Major services on off exchange Blue Select Dental and Blue Select Premier Dental plans. Standard exclusions apply. Dependents (excluding spouse) can be covered up to age 26. Service categories vary between Adult and Pediatric coverage.

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2026 dental plan options to fit your needs



	Blue Select Dental		Blue Select Premier Dental		Blue Select Standard Adult Dental	
	Pediatric benefits (Up to age 19)	Adult benefits (Age 19 and older)	Pediatric benefits (Up to age 19)	Adult benefits (Age 19 and older)	Pediatric benefits (Up to age 19) in and out of network	Adult benefits (Age 19 and older) in and out of network
Deductible	Per enrollee: \$50 2 or more enrollees: \$150 (Applies only to basic, major, and orthodontic services)	Single: \$50 Family: \$150 (Applies only to basic & major services)	Per enrollee: \$50 2 or more enrollees: \$150 (Applies only to basic, major, and orthodontic services)	Single: \$50 Family: \$150 (Applies only to basic & major services)	Per enrollee: \$50 2 or more enrollees: \$150 (Applies to diagnostic & preventive, basic, major services and orthodontic services)	Single: \$50 Family: \$150 (Applies to diagnostic & preventive, basic, and major services)
Annual maximum (per member)	None	\$750 (Applies to diagnostic & preventive, basic, and major services)	None	\$1,250 (Applies to diagnostic & preventive, basic, and major services)	None	\$1,500 (Applies to diagnostic & preventive, basic, and major services)
Out-of-pocket maximum	Per enrollee: \$350 2 or more enrollees: \$700	None	Per enrollee: \$350 2 or more enrollees: \$700	None	Per enrollee: \$450 2 or more enrollees: \$900	None
Cost-sharing:						
Diagnostic & preventive e.g. cleanings and adult exams	0%	0%	0% (includes pediatric exams)	0%	0% (includes pediatric exams)	0%
Basic e.g. fillings and adult root canals	50% (includes pediatric exams)	50%	20%	20%	20%	20%
Major e.g. select crowns, dentures	50%	50%	50%	50%	50%	50%
Orthodontic services e.g. medically necessary braces up to age 19	50%	Not covered	50%	Not covered	50%	Not covered
Waiting periods (off exchange plans)	None	Major services: 12 months (Does not apply to diagnostic & preventive or basic services)	None	Major services: 12 months (Does not apply to diagnostic & preventive or basic services)	None	None
Rates off exchange						
Single	\$35.77		\$48.81		\$52.59	
Single + spouse	\$71.55		\$97.62		\$105.18	
Single + child(ren)	\$98.13		\$124.44		\$142.82	
Single + spouse + child(ren)	\$149.68		\$192.38		\$218.24	

Rochester New York region:

Livingston, Monroe, Ontario, Seneca, Wayne and Yates Counties.

Need help choosing the right plan for you? **Call our Dental Customer Care Advocates at 1-844-829-8513 (TTY 711).**