Protect your overall health
Gum disease is linked to stroke, heart disease, diabetes and other health issues.¹ Nearly 75% of American adults have some form of gum disease.² Along with good dental care each day, regular dental checkups help detect, prevent and treat gum disease and related problems. When you choose dental coverage with Blue Cross and Blue Shield of North Carolina (Blue Cross NC), you take a big step toward protecting your overall health.

Learn more at BlueCrossNC.com/MyDentalHealth

Coverage and choice you can smile about
Blue Cross NC knows you have many demands on your budget. For this reason, and because dental health is so important to overall health, we now offer two options for high-quality dental coverage.

Dental Blue for Individuals, our core plan
Dental Blue for Individuals, our core plan, offers access to broad dental coverage at an affordable rate. Preventive services like routine oral exams and cleanings are available at no cost. And once you meet a $75 deductible, you’ll only pay 30% of the total cost for basic services and 50% of the total cost for major services.

You can visit any dentist you would like with the core Dental Blue for Individuals plan, but there are clear advantages to seeing a dentist in our broad network. They include:

+ You don’t pay for charges over the allowed amount for covered services
+ Claims are filed for you, saving time and trouble
+ Dentists in our network have been credentialed and approved

To search our dental network, go to BlueCrossNC.com, click on Find a Doctor and select Dental.
Dental Blue for Individuals PPO, our preventive plan

No one should have to go without important preventive care because they think dental insurance is too expensive. That’s why Blue Cross NC created the Dental Blue for Individuals PPO preventive plan. It covers 100% of the cost of preventive services and ensures members will save at least 30% on basic and major services when they see an in-network dentist.

A detailed description of benefits and costs are shown on the following pages.

Coverage for one person, or the entire family

Blue Cross NC offers a choice of plans for all ages and almost every budget. You can cover yourself, your child or your whole family. **Premiums are based on the age of each covered member.** See the monthly premium charts below.

### Dental Blue for Individuals, our core plan (Price Information*)

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Monthly Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Per member aged 0-18</td>
<td>$37.88</td>
</tr>
<tr>
<td>Per member aged 19-64</td>
<td>$37.88</td>
</tr>
<tr>
<td>Per member aged 65+</td>
<td>$44.79</td>
</tr>
</tbody>
</table>

### Dental Blue for Individuals PPO, our preventive plan (Price Information*)

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Monthly Rate</th>
</tr>
</thead>
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<tr>
<td>Per member aged 0-18</td>
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<tr>
<td>Per member aged 19-64</td>
<td>$22.95</td>
</tr>
<tr>
<td>Per member aged 65+</td>
<td>$22.95</td>
</tr>
</tbody>
</table>

*Rates expire 12/31/19*
What you get with the core plan
+ Broad coverage in- and out-of-network for preventive, basic and major services
+ Two check ups and cleanings covered each benefit period
+ No deductible for preventive services
+ No waiting period for preventive services
+ With the core plan, space maintainers and pulp testing are considered preventive services
+ The plan pays a set benefit percentage for basic and major services
+ Large network
+ Full coverage for you and your family
+ Premium level = $$

The Dental Blue for Individuals core plan offers full coverage. Once you meet a $75 deductible, you’ll only pay 30% of the total cost for basic services and 50% of the total cost for major services both in- and out-of-network.

What you get with the preventive plan
+ Coverage for certain preventive services and in-network savings on basic and major services
+ Two check ups and cleanings covered each benefit period
+ No deductible for preventive services
+ No waiting period for any services
+ With the preventive plan, space maintainers and pulp testing are considered basic services
+ You receive savings on in-network basic and major services
+ Large network
+ Preventive coverage for you and your family
+ Premium level = $

The Dental Blue for Individuals preventive plan offers preventive coverage. Plus, when you receive services in-network you pay the lesser of benefit, as shown on page 5. This ensures you will pay no more than 70% of billed charges. That’s a savings of at least 30%. 
# DENTAL BLUE FOR INDIVIDUALS MEMBER RESPONSIBILITY

<table>
<thead>
<tr>
<th>TYPE OF COVERAGE</th>
<th>DENTAL BLUE FOR INDIVIDUALS CORE PLAN</th>
<th>DENTAL BLUE FOR INDIVIDUALS PPO PREVENTIVE PLAN</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>IN- AND OUT-OF-NETWORK</td>
<td>IN-NETWORK</td>
</tr>
<tr>
<td><strong>Preventive services</strong></td>
<td>Oral exams, routine cleanings, routine X-rays, sealants, fluoride treatment, other diagnostic and preventive services(^3)</td>
<td>No Cost*</td>
</tr>
<tr>
<td><strong>Deductible (per benefit period)</strong></td>
<td>Basic and major services</td>
<td>$75</td>
</tr>
<tr>
<td><strong>Basic services</strong></td>
<td>Fillings, simple extractions, stainless steel crowns</td>
<td>30% coinsurance* after the deductible</td>
</tr>
<tr>
<td><strong>Major services</strong></td>
<td>Gingival curettage, gingivectomy and gingivoplasty, periodontal maintenance, inlays/onlays, porcelain crowns, dentures, bridges, oral surgery, endodontics</td>
<td>50% coinsurance* after the deductible</td>
</tr>
<tr>
<td><strong>Waiting period</strong></td>
<td>Preventive/Basic/Major</td>
<td>None/6 mos/12 mos</td>
</tr>
</tbody>
</table>

*You may owe amounts above the allowed amount on out-of-network services

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# DENTAL BLUE FOR INDIVIDUALS PLAN RESPONSIBILITY

<table>
<thead>
<tr>
<th>TYPE OF COVERAGE</th>
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<th>DENTAL BLUE FOR INDIVIDUALS PPO PREVENTIVE PLAN</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Annual total for all services(^4)</strong></td>
<td>(Maximum amount plan will pay per covered member)</td>
<td>$1,000</td>
</tr>
</tbody>
</table>
NON-DISCRIMINATION AND ACCESSIBILITY NOTICE

Blue Cross and Blue Shield of North Carolina (Blue Cross NC) provides:

+ Free aids and services to people with disabilities to communicate effectively with us, such as: qualified interpreters and/or written information in other formats (large print, accessible electronic formats, etc.)

+ Free language services to people whose primary language is not English, such as: qualified interpreters and/or information written in other languages

If you need these services, contact:

Customer Service
Call: 1-888-206-4697, 1-800-442-7028 (TTY and TDD)

If you believe that Blue Cross NC has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability or sex, you can file a grievance with:

Blue Cross NC, P.O. Box 2291, Durham, NC 27702
Attention: Civil Rights Coordinator-Privacy, Ethics & Corporate Policy Office
Call: 919-765-1663, 1-888-291-1783 (TTY)
Fax: 919-287-5613
E-mail: civilrightscoordinator@bcbsnc.com

You can file a grievance in person or by mail, fax or email. If you need help filing a grievance, the Civil Rights Coordinator-Privacy, Ethics & Corporate Policy Office is available to help you. You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at:

Online: https://ocrportal.hhs.gov/ocr/smartscreen/main.jsf
Mail: U.S. Department of Health & Human Services
200 Independence Avenue, SW Room 509F
HHH Building Washington, D.C. 20201
Call: 1-800-368-1019, 1-800-537-7697 (TDD)
Complaint forms are available online at:
http://www.hhs.gov/civil-rights/filing-a-complaint/index.html

This notice and/or attachments may have important information about your application or coverage through Blue Cross NC. Look for key dates. You may need to take action by certain deadlines to keep your health coverage or help with costs. You have the right to get this information and help in your language at no cost. Call Customer Service: 1-888-206-4697

Discrimination is Against the Law

Blue Cross NC complies with applicable federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability or sex.

Blue Cross NC does not exclude people or treat them differently because of race, color, national origin, age, disability or sex.

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NDM4L1001 v12. 6/15/2017, U13382ab
ATTENTION: If you speak another language, language assistance services, free of charge, are available to you. Call 1-888-206-4697 (TTY: 1-800-442-7028).


注意：如果您講廣東話或普通話，您可以免費獲得語言援助服務。請致電 1-888-206-4697 (TTY:1-800-442-7028)。

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HOW TO GET Dental Blue

Step 1
Enroll at BlueCrossNC.com/DentalBlue, or complete an application by contacting your local authorized Blue Cross NC agent.

Step 2
Submit payment: You can pay by credit card, set up automatic bank drafts or make a one-time payment online.

If you are mailing an application, please send to:
Blue Cross and Blue Shield of North Carolina
PO Box 30016
Durham, NC 27702-3016

Residents of North Carolina and their eligible dependents may enroll in individual or family Dental Blue plans. Your effective date will be determined by the date your application is submitted. If your application is mailed, your effective date will be set based on the date Blue Cross NC receives your application.

For more info

Call 1-800-324-4973
Monday through Thursday, from 8 a.m. to 6 p.m., and Fridays from 8 a.m. to 5 p.m.

Visit BlueCrossNC.com/DentalBlue or contact your local authorized Blue Cross NC agent.

Footnotes:
3 Refer to the member booklet for a full list of diagnostic and preventive, basic and major services, as well as the differences between in-network and out-of-network benefits.
4 Based on allowed amount. Annual maximum on all services includes diagnostic and preventive, basic and major services.
5 If you’ve terminated an individual or family Dental Blue policy within the last 12 months, you are ineligible for coverage.
6 Allowed amount for Preventive plan is 50th percentile and Core plan is 90th percentile for non-participating providers or fee schedule for participating providers.