



**A healthy smile starts
with a BlueDental plan**

Florida Blue 
Your local Blue Cross Blue Shield



Flexible dental plan options for a healthier you

Taking care of your teeth can help you maintain good overall health. That's why most Floridians turn to Florida Blue for their dental and health care coverage. Our local presence allows us to offer you flexible options for staying healthy and within your budget. You don't need a Florida Blue health plan to enroll in a BlueDental plan.

BlueDental PPO Plans

Our PPO plans work with Florida Blue medical plans to promote better health. **BlueDental Choice**SM plans offer rich benefits and broad access to dentists, including national network access, affordable coinsurance on basic and major services, and no out-of-pocket expenses for in-network preventive services. **BlueDental Copayment** plans offer benefits at an affordable rate, limited out-of-pocket expense, and predictable, fixed copayments for in-network services.

BlueDental Choice and Copayment plans are Qualified Plans and are compliant with the Affordable Care Act. These plans stress preventive care and offer many valuable benefits, including major restorative services.

Choose a plan and enroll today!

Not sure which BlueDental plan is right for you?

Whether you need help enrolling or you just want to know how to get the most out of your plan, we can help.

Visit your local Florida Blue Center anytime if you have a question, or you can find answers to many of your questions at floridabluedental.com

BlueDental Choice and Copayment Plans

A better standard of care

- You have access to an **extensive network of dentists**¹ in Florida and nationwide, and **no referrals or authorizations** are necessary when you need to see a specialist.
- Our local expertise and thorough credentialing process ensure that all network dentists meet our **high standards of quality**.
- Oral Health for Overall HealthSM provides **additional benefits—at no extra cost**—that have been shown to improve the overall health of people with certain medical conditions.²

More savings, more perks

- Our network dentists agree to **reduced fees** for our members, which saves you money.
- Through a network of participating providers, we offer a **20% discount**³ on cosmetic and orthodontic services that aren't typically covered by dental insurance.
- You'll receive **extra services** after reaching membership milestones through our BlueDental Loyalty program that can help you have a brighter, healthier smile. You're automatically enrolled, so it's easy to earn extra perks.
- Our Maximum Rollover⁴ benefit allows you to **save a portion of your unused benefit dollars** for use in future years to cover out-of-pocket costs for unexpected or major services.

We make it easy

- BlueDental PPO plans include **virtual dental visits**⁵ at TeleDentistry.com at no added cost. If you have a serious and/or painful dental issue and can't contact your dentist, you now have 24/7 access to a licensed dentist near you.
- **Access your dental and medical benefit information 24/7** in one secure place online at your Florida Blue member account or through our mobile app.
- **You can easily get help** at one of many Florida Blue centers statewide or by calling our responsive customer service team.



¹Networks are comprised of independent contracted dentists.

²Borah, BJ., Brotman, SG., Dholakia, R., Dvorožnak, S., Jansen, MT., Murphy, EA., Naessens, JM. (2022, March) "Association Between Preventive Dental Care and Healthcare Cost for Enrollees with Diabetes or Coronary Artery Disease: 5-Year Experience." *Compendium* 2022;43(3):130-139. Qualifying program conditions include diabetes, coronary artery disease, stroke, oral cancer, head and neck cancers, Sjögren's syndrome, COPD, end-stage renal disease, metabolic syndrome, and pregnancy. If you have health and dental plans through Florida Blue and any of these conditions (except pregnancy), we can enroll you automatically.

³Certain dentists have voluntarily agreed to offer a 20% discount off their usual charge for non-covered cosmetic or orthodontic services. These dentists are identified by an affiliation to either the Cosmetic Dental Discount Program or Orthodontic Discount Program. Because these dentists are neither contractually nor legally bound to offer these discounts, we recommend that you contact the provider to inquire about the continued availability of any discount prior to scheduling an appointment.

⁴Rollover applies to members 19 or older and active on the last day of the calendar year. To qualify, you must receive at least one covered service during the calendar year (routine cleanings qualify). The amount that can be rolled over is capped at \$1,000—added to the plan's annual maximum of \$1,000, your total annual benefit can reach \$2,000. Rollover dollars do not expire.

⁵Limit two visits per calendar year. Virtual visits count toward your plan's annual maximum. This service is not included in BlueDental Care prepaid plans.

BlueDental Choice and Copayment Q and QF Plans Benefit Summary for Pediatric* Benefits

	Choice Q and QF		Copayment Q and QF	
	In-network You Pay	Out-of- network You Pay	In-network You Pay	Out-of- network You Pay
Pediatric Benefits (to age 19)				
Deductible	\$50 (only basic and major services)		\$25 (preventive, basic, and major services)	
Out-of-pocket maximum (only one child covered)	\$400	Unlimited	\$400	Unlimited
Out-of-pocket maximum (more than one child covered)	\$800	Unlimited	\$800	Unlimited
Preventive No Waiting Period				
Periodic oral evaluation	0%	20%	\$0	20%
Cleanings	0%	20%	\$0	20%
Bitewing X-rays	0%	20%	\$0	20%
Fluoride treatment	0%	20%	\$0	20%
Sealant (per tooth)	0%	20%	\$6	20%
Basic No Waiting Period				
Amalgam restorations (one surface, primary/permanent)	20%	40%	\$15	40%
Resin-based composite (one surface, front tooth)	20%	40%	\$20	40%
Emergency (palliative)	20%	40%	\$12	40%
Extraction (erupted tooth or exposed root)	20%	40%	\$17	40%
Major No Waiting Period				
Crown (porcelain fused to noble metal)	50%	70%	\$302	60%
Root canal molar	50%	70%	\$305	60%
Complete denture (upper or lower)	50%	70%	\$382	60%
Upper partial (resin based)	50%	70%	\$296	60%
Medically necessary implants (pre-authorization required)	50%	70%	\$282-\$400	70%
Medically necessary orthodontics (pre-authorization required)	50%	70%	\$400	70%
Additional Benefit Programs				
Oral Health for Overall Health	Included		Included	
TeleDentistry.com benefit	2 consultations per year			

*Pediatric dental benefits end on the last day of the calendar year of the covered person's 19th birthday.

BlueDental Choice and Copayment QF Plans Benefit Summary for Adult Benefits

	Choice Plan QF		Copayment Plan QF	
	In-network You Pay	Out-of- network You Pay	In-network You Pay	Out-of- network You Pay
Adult Benefits (age 19 and older)				
Deductible (only basic and major services)	\$50		\$50	
Annual maximum	\$1,000		\$1,000	
Preventive	No Waiting Period			
Periodic oral evaluation	0%	20%	\$0	20%
Cleanings	0%	20%	\$10	20%
Bitewing X-rays	0%	20%	\$0	20%
Basic	6-Month Waiting Period*			
Intraoral (complete series including bitewings)	20%	40%	\$17	40%
Amalgam restorations (one surface, primary/permanent)	20%	40%	\$15	40%
Emergency (palliative)	20%	40%	\$12	40%
Major	6-Month Waiting Period*			
Crown (porcelain fused to noble metal)	50%	70%	\$302	60%
Complete denture (upper or lower)	50%	70%	\$382	60%
Root canal molar	50%	70%	\$305	60%
Periodontal scaling and root planing (four or more teeth per quadrant)	50%	70%	\$61	60%
Additional Benefit Programs				
Oral Health for Overall Health	Included		Included	
Maximum Rollover	Included		Included	
BlueDental Loyalty	Included		Included	
TeleDentistry.com benefit	2 consultations per year			

*Waiting periods may be waived with proof of prior continuous, comparable dental insurance coverage.

BlueDental Choice Q and QF Plans Rates

Premiums are calculated on a per person basis:

Age (yrs)	Monthly	Quarterly	Semi-annually	Annually
Individual child ¹ : 0–18	\$36.04 ²	\$108.12	\$216.24	\$432.48
Individual adult ² : 19–63	\$34.47	\$103.41	\$206.82	\$413.64
Individual adult ² : 64 or older	\$52.77	\$158.31	\$316.62	\$633.24

Monthly Calculation Example

Adult (41)	\$34.47
Adult (35)	\$34.47
+ Children (9, 12)	\$72.08
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Total Premium Rate	\$141.02

BlueDental Copayment Q and QF Plans Rates

Premiums are calculated on a per person basis:

Age (yrs)	Monthly	Quarterly	Semi-annually	Annually
Individual child ¹ : 0–18	\$21.55 ³	\$64.65	\$129.30	\$258.60
Individual adult ² : 19–63	\$25.35	\$76.05	\$152.10	\$304.20
Individual adult ² : 64 or older	\$39.31	\$117.93	\$235.86	\$471.72

Monthly Calculation Example

Adult (41)	\$25.35
Adult (35)	\$25.35
+ Children (9, 12)	\$43.10
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Total Premium Rate	\$93.80

- Rates effective Jan. 1, 2024
- Monthly premium, bank draft only (first and future premiums will be drafted)
- Quarterly, semiannual, and annual payments may be made by bank draft (first and future premiums will be drafted), check, or money order

¹Includes child(ren) of domestic partner (provided domestic partner is also covered).

²Includes domestic partner.

³Rate per child, to a maximum of three children.

BlueDental CareSM

Our low-cost BlueDental Care prepaid plan for adults and children provides many dental services, including preventive services such as exams, X-rays, and cleanings, at little or no cost when you visit a dentist in our Care network. Other services, such as oral cancer screenings and teeth whitening, are available at a set copayment.

BlueDental Care plan benefits include:

- No annual maximum or deductibles
- No exclusions for pre-existing conditions
- No pre-determination of benefits required

Plan limitations

- No out-of-network care
- No specialist coverage
- Not available for purchase in some counties
- Limited service area (check our directory to see provider availability in your area)

This plan requires a one-year contract. You will also need to select a provider from the Care network when you enroll. This is a necessary step before obtaining covered dental services.

To find a dentist in our BlueDental Care network, visit **floridabluedental.com/find-a-dentist** and select “Prepaid F Plan” from the “Select Plan Name” list.

If you don't see your dentist listed in our Care network, or you would prefer a plan that offers a broader network of providers and the option of visiting any dentist, our affordable BlueDental Copayment plan gives you access to a large dental network in Florida and nationwide.

BlueDental Care

Benefit Summary for Individual Plan FI315

	Your Copayment Amount
Diagnostic & Preventive¹	
Periodic oral evaluation	No charge
Comprehensive oral evaluation	No charge
X-rays – bitewing (two films)	No charge
X-rays – intraoral (complete series)	No charge
X-rays – panoramic film	No charge
Cleanings (adult/child)	No charge
Fluoride treatment	No charge
Sealant (per tooth)	\$20
Oral cancer screening	\$70
Basic¹	
Amalgam restorations (one surface, primary or permanent)	\$30
Resin-based restorations (one surface, anterior)	\$45
Root canal (bicuspid)	\$270
Root canal (molar)	\$390
Periodontal scaling and root planing (four+ teeth per quadrant)	\$85
Full mouth debridement (to enable eval and diagnosis)	\$80
Extraction, erupted tooth, or exposed root	\$55
Surgical removal of erupted tooth	\$60
Major¹	
Crowns	\$410 + lab
Complete denture (upper)	\$550 + lab
Upper partial (resin based)	\$495 + lab
Bridge	\$410 + lab
Teeth whitening per arch	\$210
Deductible	None
Annual maximum benefit	No maximum
Pre-existing conditions	Covered
Out-of-area emergency care	Up to \$100 per member, per year, if over 100 miles out of area
Out-of-network benefits	None
Covered procedure performed by specialists²	25% discount if participating specialist

¹Some limitations apply. Minimum 12-month participation is required.

²Usual and Customary rates.

BlueDental Care

Rates Prepaid Individual Plan (FI315)

Policy Type	Monthly Premium ¹	Annual ²
Individual	\$11.99	\$143.88
Individual + one dependent ³	\$22.78	\$273.36
Individual + two dependents ⁴	\$32.37	\$388.44
Individual + three dependents ⁴	\$41.97	\$503.64
Individual + four dependents ⁴	\$50.36	\$604.32

Rates effective Feb. 1, 2012.

¹Monthly premium + \$1 administrative fee, bank draft only.

²Annual premium by check, money order, or credit card. Does not include a one time nonrefundable enrollment fee of \$35.

³Includes domestic partner.

⁴Includes child(ren) of domestic partner (provided domestic partner is also covered).





We're always open at **floridabluedental.com**

For more information: 1-877-FL-BLUE-0 (1-877-352-5830)

Look for **Florida Blue** on   

Dental plans are offered by Florida Combined Life Insurance Company, Inc. (FCL), an affiliate of Florida Blue and an Independent Licensee of the Blue Cross and Blue Shield Association.

We comply with applicable federal civil rights laws and do not discriminate on the basis of race, color, national origin, age, disability, or sex. For more information visit floridablue.com/ndnotice.

ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-800-352-2583 (TTY: 1-877-955-8773). FEP: Llame al 1-800-333-2227.

ATANSYON: Si w pale Kreyòl ayisyen, ou ka resewva yon èd gratis nan lang pa w. Rele 1-800-352-2583 (pou moun ki pa tande byen: 1-800-955-8770). FEP: Rele 1-800-333-2227.

This benefit summary provides a very brief description of Florida Combined Life's insurance products. This is not an insurance policy and only the actual provisions of an issued policy control. Florida Combined Life's policies set forth the rights and obligations of covered persons and Florida Combined Life. Please be aware that certain limitations and exclusions apply, and certain coverage may reduce or terminate due to age or lack of eligibility. If you enroll for coverage, you will be furnished with a policy or certificate of insurance. Please read your insurance documents carefully.