

DENTAL COVERAGE FOR ADULTS, FAMILIES AND CHILDREN

Are you looking for the right dental plan for you or your family? Blue Cross and Blue Shield of Kansas City (Blue KC) offers comprehensive individual and family dental plans at affordable prices. We provide an extensive network of dentists, ensuring choice and convenience for you.

To shop for dental insurance through Blue KC call 816-395-2583, visit BlueKC.com or speak to your trusted broker.

IN-NETWORK DENTAL BENEFITS (NON-PARTICIPATING DENTAL BENEFITS ARE AVAILABLE)										
Plan Name	BlueDental Preventive 1000		BlueDental 1000		BlueDental Plus 1000		BlueDental Plus 1200		BlueDental Plus 1500	
Blue Dental Network	PPO	Choice	PPO	Choice	PPO	Choice	PPO	Choice	PPO	Choice
	Coinsurance (Plan Pays)		Coinsurance (Plan Pays)		Coinsurance (Plan Pays)		Coinsurance (Plan Pays)		Coinsurance (Plan Pays)	
DIAGNOSTIC & PREVENTIVE	100%	85%	100%	85%	100%	85%	100%	85%	100%	85%
BASIC ¹ Requires a 6-month waiting period	Not covered		80%	70%	80%	70%	80%	70%	80%	70%
MAJOR Requires a 12-month waiting period	Not covered		Not covered		50%	50%	50%	50%	50%	50%
ORTHODONTIA	Not covered		Not covered		Not covered		Not covered		Not covered	
Deductible ²	\$0	\$0	Preventive: \$0		Preventive: \$0		Preventive: \$0		Preventive: \$0	
			Basic: \$50		Basic: \$50		Basic: \$50		Basic: \$50	
			Major: Not covered		Major: \$200		Major: \$150		Major: \$150	
Calendar Year Maximum	Blue KC pays up to: \$1,000/each covered person		Blue KC pays up to: \$1,000/each covered person		Blue KC pays up to: \$1,000/each covered person		Blue KC pays up to: \$1,200/each covered person		Blue KC pays up to: \$1,500/each covered person	
RATE/MONTH										
Child ³	\$16.83		\$26.84		\$31.31		\$33.55		\$35.78	
Adult (Under 65)	\$16.83		\$30.25		\$39.19		\$41.43		\$43.67	
Adult (65+)	\$18.17		\$32.66		\$42.32		\$44.74		\$47.16	

Preventive services are available starting at the effective date of coverage, while other services require a waiting period.

Services requiring a waiting period include basic restorative, major restorative, endodontics, periodontics and oral surgery needs, like root canals, tooth extractions and preparation of the mouth for dentures, and anesthesia (when used during a covered service).

¹ The waiting period for Basic Services and Major Services can be waived with prior coverage from Blue KC or another carrier. The individual must have at least six months of continuous prior coverage to waive the Basic Services waiting period, and at least 12 months of continuous prior coverage to waive the Major Services waiting period. The individual must apply for Blue KC coverage within 30 days of prior coverage ending.

² Deductible amount for Basic Services and Major Services are per each covered person.

³ A child is under the age of 18; rates are based on the contract holder's age as of January 1 of the current year. The Dependent Limiting Age is 26.

Refer to the dental contract for complete terms and conditions.



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Dental Service Types

DIAGNOSTIC & PREVENTIVE CARE DENTAL (TYPE I) SERVICES

No waiting period from effective date. Deductible does not apply.

- Oral evaluations – two per calendar year
- X-rays – complete mouth once every three calendar years; single tooth – 12 per calendar year; bitewing –two occurrences per calendar year
- Teeth cleaning – two per calendar year
- Fluoride treatment – two per calendar year age 19 and under
- Sealant application on posterior tooth – one treatment per tooth every three years (age 14 and under)
- Fixed and removable space maintainer (initial appliance only)
- Emergency treatment – temporary pain relief

BASIC CARE DENTAL (TYPE II) SERVICES

Requires a six-month waiting period from effective date.

Deductible applies.

- Fillings – composite fillings on all teeth
- Recementation of existing inlays, crowns and bridges
- Endodontics – root canals and pulpal therapy
- Tooth extraction (simple and surgical, including wisdom teeth)
- General Anesthesia – payable only if provided in connection with a covered service

MAJOR DENTAL (TYPE III) SERVICES

Requires a 12-month waiting period from effective date.

Deductible applies.

- Periodontics – gum/tissue care and surgery
- Single crowns, inlays, onlays, bridges and dentures
- Maintenance of Prosthodontics – adjustment/repair of dentures

About Our Dental Networks

BLUEDENTAL PPO PROVIDERS

The preferred network of more than 1,200 dentists in the Blue KC service area offers the highest discount level of Blue KC dental networks, resulting in the lowest out-of-pocket costs for covered services. Outside our service area, providers are available through the GRID Blue Cross and Blue Shield national network.

BLUEDENTAL CHOICE PROVIDERS

The BlueDental Choice network offers access to over 1,500 local in-network dentists but has higher out-of-pocket costs for covered services compared to other Blue KC dental networks. Outside of our service area, providers are available through the GRID+ Blue Cross and Blue Shield national network.

NON-PARTICIPATING PROVIDERS

Seeing a non-participating dentist results in the highest out-of-pocket costs for covered services. Members may be responsible for filing claims and may be balanced billed by the non-participating provider.

Dental Plan Exclusions and Limitations

Some covered services have limitations based on age or how often they're used. Definitions of covered services may vary by plan. Plans have exclusions, limitations and terms under which they may be continued in force or discontinued. In addition, the following services and supplies are NOT covered:

- Experimental services, supplies or procedures
- Treatment of any jaw joint disorder, such as a joint disorder commonly known as temporomandibular joint disorder (TMJ)
- Replacement of lost, missing or stolen dental appliances and certain damaged dental appliances
- Those services defined as not Medically Necessary for the diagnosis, care or treatment of a condition
- All other limitations and exclusions in the dental contract