

## Class D Orthodontic

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### Blue Cross Blue Shield FEP Dental Class D Orthodontic

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#### Important things you should keep in mind about these benefits:

- Please remember that all benefits are subject to the definitions, limitations, and exclusions in this brochure and are payable only when we determine they are necessary for the prevention, diagnosis, care, or treatment of a covered condition and meet broadly accepted national standards of practice.
- There is no calendar year deductible.
- We pay 50% of the plan allowance up to the lifetime maximum. The lifetime maximum for orthodontic services (clear aligners or traditional braces) depends on the option in which you enroll and if you choose to receive services from a network dentist. If you are covered by High Option, the lifetime maximum is up to \$3,500. However, the plan allowance (see page 16 [\[Plan Allowance\]](#)) depends on the participation status of the dentist. If you are enrolled in Standard Option, the lifetime maximum for services rendered by an in-network dentist is up to \$2,500 and for services rendered by an out-of-network dentist the lifetime maximum is up to \$1,250. Your out-of-pocket expenses will be higher when using an out-of-network dentist.
- In no instance will BCBS FEP Dental allow more than \$2,500 in orthodontic benefits under Standard Option.
- The benefit for the initial placement will not exceed 25% of the lifetime maximum benefit amount for the appliance. All subsequent payments will be made in equal installments pro-rated over the balance of a maximum period of 29 months. If your coverage terminates, all orthodontia benefit payments will end.
- Covered services are limited to the maximum allowable charge as determined by the plan and are subject to alternate benefit, coinsurance, maximum benefit limits, and the other limitations described in this plan document.

- We cover traditional orthodontic treatment (braces) as well as clear aligners. To determine what is most cost effective, we recommend a pretreatment estimate.
- The allowed amount is based on the orthodontic treatment and does not guarantee that the full lifetime maximum will be paid out on a single treatment. If the orthodontic treatment is already in progress at the time of eligibility, the orthodontic benefit will be prorated based on the number of months remaining in the treatment plan up to the lifetime maximum.
- Coverage for pre-treatment orthodontic exam and radiographic images may be allowed if completed more than 3 months from initial appliance placement.
- Applying the limited access provision will not result in additional payment under the High Option orthodontic plan.
- The following is an all-inclusive list of covered services.

## You Pay:

### High Option

- **In-Network:** 50% of the plan allowance up to the lifetime maximum. You are responsible for all charges that exceed the lifetime maximum.
- **Out-of-Network:** 50% of the plan allowance up to the lifetime maximum and any difference between our allowance and the billed amount.

### Standard Option

- **In-Network:** 50% of the plan allowance up to the lifetime maximum. You are responsible for all charges that exceed the lifetime maximum.
- **Out-of-Network:** 50% of the plan allowance up to the lifetime maximum and any difference between our allowance and the billed amount.