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## **In-Network Services**

## Blue Cross Blue Shield FEP Dental Section 4 Your Cost for Covered Services

## **In-Network Services**

You pay the coinsurance percentage of our plan allowance for covered services. Before each appointment, verify the dentist is in-network at the service location.

Only dentists listed with their corresponding locations are in network. Not all dentists at a location may be in network and the same dentist at a different location may not be in network. It is your responsibility to ensure that the listed dentist is active and in network at the time and location at which you receive services.

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