

BlueCare® Freedom Dental Plans

Dental plans offered by Blue Cross and Blue Shield of Texas, (BCBSTX), a division of Health Care Service Corporation, bring brand recognition of the Blue Cross and Blue Shield name to both employers and their employees — a solid reputation for trust and reliability.

BCBSTX offers a choice of standard benefit plan designs and excellent customer service from a dedicated **Dental Service Unit**.

BCBSTX dental products allow you to offer a quality, flexible dental plan at an affordable price, an important part of both employee and member satisfaction.



Overview of Standardized BlueCare Freedom Dental Plans*											
	D501	D601	D602	D701	D702	D811	D821	D822	D801	D802	D803
Group Size	2+	2+	2+	10+	10+	10+	10+	10+	10+	10+	10+
Diagnostic and Preventive Care Benefits	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
Miscellaneous Services (Labs and Tests/Sealants thru age 16) Space Maintainers/Palliative	80%	80%	80%	80%	80%	100%	100%	100%	100%	100%	100%
Restorative Services (including Simple Extractions)	80%	80%	80%	80%	80%	80%	80%	80%	80%	80%	80%
General Services (Anesthesia, Stainless Steel Crowns)	Not Covered	50%	50%	50%	50%	80%	80%	80%	80%	80%	80%
Endodontic Services	Not Covered	50%	50%	50%	50%	80%	80%	80%	80%	80%	80%
Periodontal Services	Not Covered	50%	50%	50%	50%	80%	80%	80%	80%	80%	80%
Oral Surgery Services	Not Covered	50%	50%	50%	50%	80%	80%	80%	80%	80%	80%
Crowns, Inlays/ Onlays Services, Implants**	Not Covered	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%
Prosthodontic Services	Not Covered	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%
Orthodontic Benefits (Adult & Child)	Not Covered	Not Covered	Not Covered	50%	50%	Not Covered	50%	50%	50%	50%	50%
Deductible Deductible waived for Prevention and Diagnosis	\$25/\$75 Yes	\$50/\$150 Yes									
Annual Maximum	\$750	\$1,000	\$1,500	\$1,500	\$1,500	\$1,000	\$1,500	\$1,500	\$1,500	\$2,000	\$2,000
Ortho Lifetime Maximum	Not Applicable	Not Applicable	Not Applicable	\$1,000	\$1,500	Not Applicable	\$1,000	\$1,000	\$1,500	\$1,500	\$2,000
Waiting Periods	None	None	None	None	None	None	None	None	None	None	None

*Amounts shown are paid by the Plan. BlueCare Freedom Dental pays up to the allowable amount. ** Inplants covered on Plans D701, D702, D801, D802, D803, D811, D821