

**Blue Cross Blue Shield FEP Dental
Section 3 How You Obtain Care**

FEHB First Payor

If you have dental coverage through your FEHB plan and coverage under BCBS FEP Dental, your FEHB plan will be the first payor of any benefit payments. When services are rendered by a provider who participates with both your FEHB and your BCBS FEP Dental plan, the BCBS FEP Dental Maximum Allowed Amount will be the prevailing charge, in these cases. We are responsible for facilitating the process if the primary FEHB payor is Blue Cross Blue Shield Service Benefit Plan. You are responsible for the difference between the FEHB and BCBS FEP Dental benefit payments and the BCBS FEP Dental Maximum Allowed Amount.

If you are covered under the Blue Cross Blue Shield Service Benefit Plan Basic Option and BCBS FEP Dental, you are not responsible for a \$30 co-pay. If your provider collects the co-pay upfront, they are required to reimburse the co-pay in full once the claim has processed under BCBS FEP Dental.

It is important to bring your FEDVIP and FEHB (if applicable) identification cards to every dental appointment because most FEHB plans offer some level of dental benefits separate from your BCBS FEP Dental coverage. Presenting both identification cards can ensure that you receive prompt payment for the maximum allowable benefit under each Program. Please see the following examples.