

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

Class D Orthodontic

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 generally accepted dental protocols.
- There is no calendar year deductible.
- There is no waiting period under the BCBS FEP Dental Plan.
- We pay 50% of the plan allowance up to the lifetime maximum. The lifetime maximum for orthodontic services depends on the option in which you enroll and if you choose to receive services from a network provider. If you are covered by High Option, the lifetime maximum is up to \$3,500. However, the maximum amount allowed (see page 11 [[Maximum Amount Allowed](#)]) depends on the participation status of the provider. If you are enrolled in Standard Option, the lifetime maximum for services rendered by an in-network provider is up to \$2,500 and for services rendered by an out-of-network provider the lifetime maximum is up to \$1,250. Your out-of-pocket expenses will be higher when using an out-of-network provider.
- In no instance will BCBS FEP Dental allow more than \$2,500 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 us and are subject to alternative benefit, coinsurance, maximum benefit limits, and the other limitations described in this plan document.
- We cover traditional orthodontic treatment (braces) as well as Invisalign®. 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 ortho 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 x-rays 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.
- Any dental service or treatment not listed as a covered service is not eligible for benefits.
- This requirement includes assumption of payments for covered orthodontia services up to the FEDVIP policy limits, and full payment where applicable up to the terms of FEDVIP policy for covered services completed (but not initiated) in the 2022 plan year such as crowns and implants.

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.