

Traditional Plus Dental Coverage Benefits-at-a-Glance

Member's responsibility (deductible, coinsurance and dollar maximums)

Deductible	\$50 per person; \$100 per family.
Coinsurance	
<ul style="list-style-type: none"> • Class 1 services • Class 2 services • Class 3 services 	25% of approved amount 50% of approved amount 50% of approved amount
Dollar maximums	
<ul style="list-style-type: none"> • Annual maximum benefit on Class 1, 2 and 3 services 	\$1,200 per member <i>(effective January 1, 2011)</i>

Class I services - Preventive

Oral exams	75% after deductible, twice per calendar year
A set (up to 4) of bitewing x-rays	75%, twice per calendar year
Full-mouth and panoramic X-rays	75%, once every 60 months
Prophylaxis (teeth cleaning)	75%, twice per calendar year
Fluoride treatment	75%, twice per calendar year
Space maintainers	75%, one per quadrant per lifetime, up to age 19
Palliative emergency treatment	75%
Pit and fissure sealants — for members age 19 or under	75%, once per tooth every 36 months when applied to the first and second permanent molars

Class 2 services - Restorative

Fillings - permanent teeth	50% after deductible, replacement fillings covered after 24 months or more after initial filling
Fillings - primary teeth	50%, replacement fillings covered after 12 months or more after initial filling
Inlays, onlays, crowns and gold fillings - permanent teeth	50%, once every 60 months per tooth, payable for members age 12 and older
Recementing of inlays, onlays, crowns and bridges	50%, three per calendar year
Root canal treatment – permanent tooth	50%, once every 12 months for teeth with one or more canals
Scaling and root planing	50%, once every 24 months per quadrant
Limited occlusal adjustment	50%, limited occlusal adjustments covered up to five times in a 60-month period
Occlusal biteguards	50%, once every 12 months
General anesthesia or IV sedation	50%, when medically necessary and performed with oral or dental surgery
Extractions - simple and surgical	50%
Relining or rebasing of partial or complete dentures	50%, once every 36 months per arch
Tissue conditioning	50%, once every 36 months per arch
Repairs and adjustments of partial or complete dentures	50%, six months or more after it is delivered

Class 3 services - Constructive

Removable dentures (complete and partial)	50% after deductible, once every 60 months
Bridges (fixed partial dentures) – for members age 16 or older	50%, once every 60 months after original was delivered
Endosteal implants — for members age 16 or older who are covered at the time of the actual implant placement	50%, once per tooth in a member lifetime when implant placement is for teeth numbered 2 – 15 and 18 – 31

Note: For non-urgent, complex or expensive dental treatment such as crowns, bridges or dentures, members should encourage their dentist to submit the claim to Blue Cross Blue Shield of Michigan for predetermination **before** treatment begins.

This is intended as an easy-to-read summary. It is not a contract. An official description of benefits is contained in applicable Blue Cross Blue Shield certificate and riders. Payment amounts are based on the Blue Cross Blue Shield approved amount, less any applicable deductible and/or coinsurance amounts required by the plan. This coverage is provided pursuant to a contract entered into in the state of Michigan and shall be construed under the jurisdiction and according to the laws of the state of Michigan.