Thank you for choosing Dental Blue. This guide will help you get the most from your plan by providing you with a summary of common benefits and services, as well as a general understanding of how your dental coverage works. For specific details, please refer to your subscriber certificate.

If you need help understanding your plan, or if you have any questions, call Member Service at the number on the front of your ID card.
How Dental Plans Work

Basic plans help offset the cost of diagnostic and preventive dental care. More comprehensive plans may also cover a percentage of restorative care. Most plans limit the benefit expenses per calendar year (or per lifetime, in the case of orthodontic benefits).

Know How to Read Your ID Card

Your Dental Blue ID card contains important information like our Member Service telephone number and your ID number. Be sure to always carry your ID card with you, and show it to all of your providers so they can keep your records up to date.

Our Plans

Dental Blue

Our traditional dental plan offers flexible dental coverage across a large network of dental providers. Qualified services are covered by the plan. You’re only responsible for deductibles and co-insurance when you see an in-network provider.

Dental Blue PPO

You can choose to see any dentist you want. However, if you get care from a dentist in our Dental Blue PPO network, you’ll receive the most coverage. Out-of-network dentists can charge more than what the plan covers, and you’ll be responsible for paying the difference.

Dental Blue Select

Our incentive PPO plan offers the same flexibility as our traditional PPO plan but with a higher level of benefits when you choose to visit preferred providers.

Dental Blue Freedom

The largest selection of network dentists, plus the ability to see out-of-network dentists, gives you the most choice. You can visit any dentist in our Dental Blue and Dental Blue PPO networks and receive the most coverage. If you go out-of-network, you’re still covered, but may have to pay higher out-of-pocket costs.

Nationwide Network Access

If you’re outside of Massachusetts, you’ll have access to over 310,000 credentialed provider locations nationwide.

What you should know before visiting a dentist:

Which Plan Do You Have

Our plans include, Dental Blue®, Dental Blue® PPO, Dental Blue® Select, and Dental Blue® Freedom. Please refer to your benefit summary, or log in to MyBlue® at bluecrossma.com/myblue to view your plan details.

What’s Covered

Your plan will cover one or more of the following:

• Preventive benefits for diagnostic and preventive care
• Basic benefits for restorative care (fillings), oral surgery, periodontics (gum and bone), endodontics (roots and pulp), prosthetic maintenance, and other covered services
• Major benefits for prosthodontics (teeth replacement) and restorative (crowns)
• Orthodontic benefits for exams and appliances
• Out-of-network benefits when you see a dentist not contracted with Dental Blue

How Much Coverage You Have Within Each Benefit Group

You may have full, partial, or no coverage. See your subscriber certificate for details.

If You Have a Deductible or Co-insurance

You may be responsible for some of the cost for services. Knowing your deductible and co-insurance amounts will help you understand what you have to pay.

If You Qualify for Enhanced Dental Benefits

See page 2 for more information on the program.
Your Claims

Participating Dentists
Most participating dentists will send in your claims. We’ll pay them directly if we receive the claim within two years of completed service.

Non-Participating Dentists
If a dentist doesn’t file the claim, download our dental claim form at bluecrossma.com/myblue. Mail the completed form to:
Blue Cross Blue Shield of Massachusetts
Dental Operations
P.O. Box 986030
Boston, MA 02298

Manage Your Dental Budget: Tips to help you plan for any out-of-pocket costs.

Show Your Dental Blue ID Card Every Time You See a Dentist
This will ensure your claims are filed properly.

Find Out What You Owe for Each Visit
Some plans require you to pay a deductible or co-insurance.

Know Your Benefit Maximum
Once you reach the calendar-year limit and use any additional accumulated maximum rollover benefit, no more services will be covered until the following year.

Monitor the Balance of Your Benefit Maximum
• Call Member Service at the number on the front of your ID card
• Log in to your MyBlue account at bluecrossma.com/myblue

Visit Dentists in Our Network
You’ll receive the most coverage when you visit dentists that participate in our network.

For More Information

Member Service
For general questions about your coverage, call Member Service at the number on the front of your ID card, Monday through Friday, 8:00 a.m. to 6:00 p.m. E.T., TTY: 711.

Find a Doctor or Dentist
Our Find a Doctor & Estimate Costs tool makes it easy for you to find what you need.
• Search for doctors, dentists, hospitals, and other health care providers
• Read and write reviews
• Compare up to ten doctors at a time
Visit bluecrossma.com/findadoctor, or call Member Service at the number on the front of your ID card. For questions about out-of-country provider access and services, call 1-800-810-BLUE (2583).

Get the Most From Your Plan

Enhanced Dental Benefits
Dental Blue offers the only condition-specific total health solution with a complete program focusing on at-risk members with qualifying medical conditions. Our Enhanced Dental Benefits offer additional, specific support, including full coverage for preventive and periodontal services that have been connected to improved overall health. To learn more about specific conditions included in this benefit review your subscriber certificate on MyBlue at bluecrossma.com/myblue.

MyBlue Member App
Get instant, secure access to your health care information from the convenience of your mobile device.
• Access an interactive ID card, and email a copy to your doctor
• Direct dial important phone numbers like Member Service
• Review recent claims, prescriptions, and doctor visits
• Find nearby doctors, dentists, and hospitals
• Download the app from the App Store® or Google Play™.

Accumulated Maximum Rollover
Some plans allow you to rollover a portion of your unused dental benefits from year to year. This can help offset higher out-of-pocket costs for complex procedures. To find out if you have this benefit, call Member Service at the number on the front of your ID card, or log in to MyBlue at bluecrossma.com/myblue.
Frequently Asked Questions

Q: I only received two Dental Blue ID cards. How do I get additional cards for my family?
A: You can order replacement and/or additional ID cards online through MyBlue at bluecrossma.com/myblue. You can also call Member Service at the number on the front of your ID card.

Q: How do I find a dentist or specialty dental provider who is participating with my dental plan?
A: You can use our online Find a Doctor & Estimate Costs tool at bluecrossma.com/findadoctor to search for dentists and other specialty providers that participate in your plan. Log in for best results, or continue without logging in by choosing your current dental plan.

Q: Do all Dental Blue members have nationwide network access?
A: Yes, all dental members have access to the over 320,000 credentialed provider locations nationwide. To find a dentist, visit bluecrossma.com/findadoctor.

Q: Where do I find my specific dental coverage information?
A: You can look up your coverage information, including services and amounts covered, deductible, co-insurance, and annual benefit maximum, by logging in to MyBlue at bluecrossma.com/myblue, reviewing your subscriber certificate, or by calling Member Service at the number on your ID card.

Q: My plan has a calendar-year maximum. Is that per person or do all my family’s dental services apply toward one calendar-year maximum? How do I check to see if my maximum has been reached?
A: Your calendar-year maximum applies individually for each person enrolled. To find out how much has been applied toward your plan maximum, you can log in to MyBlue at bluecrossma.com/myblue for access to tools and resources that help you monitor your dental claims. You can also call Member Service at the number on the front of your ID card.

Q: If my cleanings are covered at 100 percent, does that count toward my calendar-year maximum?
A: Generally, all services paid by Dental Blue are applied toward your plan-year or calendar-year maximum. An exception is when a member is also enrolled in our condition-specific Enhanced Dental Benefits program. Under this program, deductibles and co-insurance do not apply to condition-specific services provided in addition to dental benefits already covered by your plan. Condition-specific services are also excluded from the calendar-year maximum. Call Member Service at the number on the front of your ID card for more information.

Q: My previous plan had orthodontic coverage, and my child is in the middle of a 24-month treatment plan. Will some orthodontic services still be covered under my new Dental Blue plan?
A: Any remaining orthodontic treatment received after your new plan’s effective date will be covered based on your plan’s orthodontic benefits and up to the applicable lifetime maximum. Not all plans include orthodontic coverage. Please review your Dental Blue plan specifics for more details.

Q: How do I enroll in the Enhanced Dental Benefits program?
A: Call Member Service at the number on the front of your ID card to request an enrollment form and to find out more information. You may also be automatically enrolled in the Enhanced Dental Benefits program if you have medical coverage through Blue Cross Blue Shield of Massachusetts and have been identified to have a qualifying medical condition.

Q: My children are covered by both my dental plan and my spouse’s dental plan. Am I able to coordinate benefits so I can reduce my out-of-pocket expenses?
A: Yes, specific criteria determine which plan should be billed as the primary coverage when a family has duplicate coverage. If either coverage is a medical plan, that plan would be primary. When the family has both Dental Blue and coverage through another dental insurer, the primary coverage is determined based on the parents’ birthdates. Review your benefit information by logging in to MyBlue at bluecrossma.com/myblue, or check your subscriber certificate for more details.

Blue Cross Blue Shield of Massachusetts complies with applicable federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, sex, sexual orientation or gender identity.

ATTENTION: If you don’t speak English, language assistance services, free of charge, are available to you. Call Member Services at the number on your ID Card (TTY: 711).

ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia con el idioma. Llame al número de Servicio al Cliente que figura en su tarjeta de identificación (TTY: 711).

ATENÇÃO: Se fala português, são-lhe disponibilizados gratuitamente serviços de assistência de idiomas. Telefone para os Serviços aos Membros, através do número no seu cartão ID (TTY: 711).