



Horizon Blue Cross Blue Shield of New Jersey

Making Healthcare Work®

Pemberton Township BOE – Group 86004

		Traditional Plan	HDC Plan D
Annual Deductible		\$0 per person	NONE
Out-of-network		Yes	No
Annual Maximum		\$1,000	NONE
Ortho Maximum		\$1,000	\$1,000
COVERED SERVICES		OUT-OF-POCKET COSTS	OUT-OF-POCKET COSTS
Exams and Preventive Services Exams*	All exams Fluoride treatment (child) Sealant application Prophylaxis	0%	\$0
X-rays*	Panoramic Full-mouth X-rays	0%	\$0
Space maintainers	Space maintainers – fixed unilateral/bilateral	20%	\$0
Restorations and Repairs	Amalgam restorations Composite restorations (other than for molars)	20%	\$0
Endodontics	Pulp cap/Pulpotomy Root canal therapy – anterior, bicuspid	20%	\$0
	Root canal therapy molar	20%	\$0
	Denture adjustments and repairs	20%	\$26
Periodontics	Scaling and root planing Gingivectomy Soft tissue grafts Periodontal maintenance	50%	\$0
	Osseous surgery	50%	\$200
Oral Surgery	Routine extractions Soft tissue surgical extractions Incision and drainage of abscess	50%	\$0
	Surgical extractions - impacted	50%	\$0
COVERED SERVICES		OUT-OF-POCKET COSTS	OUT-OF-POCKET COSTS
Major Restoration	Crowns	50%	\$210
Dentures	Complete and partial dentures	50%	\$250
Fixed Bridges	Retainers and pontics	50%	\$210
Orthodontic Procedures (per optional rider)	Children only. Limited to one complete orthodontic treatment per lifetime	50%	\$1,000

Services are for illustrative purposes only. For complete listing of covered services, plan limitations, deductibles and maximums, consult your benefit booklet.

Dental Vocabulary

Visits and Exams

Fluoride Treatment - a prescription strength fluoride product that helps strengthen the tooth surface and prevent cavities.

Sealant Application - a composite material used to seal the decay-prone pits, fissures and grooves of children's teeth to prevent tooth decay.

Space Maintainer - a dental appliance that fills the space of a lost tooth or teeth and prevents other teeth from moving into the space. Used especially in orthodontic and pediatric treatment.

Prophylaxis - the scaling and polishing procedure performed to remove calculus, plaque and stains from teeth.

Restorations and Repairs

Restoration - any material or device used to replace tooth structure lost because of decay or fracture.

Amalgam - an alloy used to restore teeth.

Composite Restoration - a tooth-colored material used to restore teeth.

Endodontics

Endodontics - the dental specialty that deals with injuries to or diseases of the pulp, or nerve, of the tooth.

Pulp Cap - procedure used by which pulp is covered with a dressing or cement.

Pulpotomy - to remove a portion of the tooth's pulp.

Root Canal Therapy - the process of treating disease or inflammation of the pulp or root canal. This involves removing the pulp and tooth's nerves and filling the canal(s) with an appropriate material for a permanent seal.

Anterior - refers to the teeth and tissues toward the front of the mouth.

Molar - the broad, multicusped back teeth used for grinding food.

Bicuspid - a two-cusped tooth found between the molar and the cuspid.

Periodontics

Periodontics - the dental specialty that deals with injuries or diseases of the gums and supporting tissues.

Scaling - a procedure used to remove plaque, calculus and stains from the teeth.

Root Planning - the process of scaling and planning root surfaces to remove all calculus, plaque and infected tissue.

Gingivectomy - the surgical removal of gingival (gum) tissue.

Osseous Surgery - surgery performed to correct damage to gingival (gum) tissue and supporting structures as a result of periodontal disease.

Oral Surgery

Surgical Extractions - extraction of an unerupted tooth by making a surgical incision.

Incision and Drainage of Abscess - making an incision so the trapped liquids in the infected tissue can escape.

Major Restoration

Crowns - the portion of the tooth that is covered by enamel. Also a dental restoration that covers the area of the tooth and restores it to its original shape.

Dentures

Complete Dentures - a dental prosthesis that replaces all the natural teeth of a single dental arch.

Partial Dentures - a dental prosthesis that replaces one or more, but less than all, of the natural teeth and associated structures in an arch.

Fixed Bridges

Retainers - the part of a fixed bridge that attaches a false tooth to a natural tooth or implant.

Pontics - an artificial tooth used in a fixed bridge to replace a missing tooth.

Q&A Questions & Answers

Answers to frequently asked questions about the Horizon Dental Option Plan

Can I go to any dentist?

Yes. You have the freedom to use any dentist.

How does my plan work?

You have the freedom to receive dental services from any dentist. However, if you use a dentist who participates with the Horizon Dental PPO Network, you can maximize your benefits and save money. Discounts off participating dentists' charges range between 10 and 30 percent.

With an out-of-network option, if you use a nonparticipating dentist, you will still receive a benefit for eligible services. Nonparticipating dentists have the freedom to charge their normal fees. We pay up to plan allowances. Charges above our plan allowance will be your responsibility. You may be required to pay at the time of service and submit a claim for reimbursement.

How can I take the best advantage of my plan?

By using a dentist who participates with the Horizon Dental PPO Network.

Where are participating dentists located?

Members have access to an extensive network of participating dentists in our regional service area, including the 21 counties of New Jersey, five boroughs of New York City (Manhattan, Staten Island, the Bronx, Queens and Brooklyn), Nassau, Suffolk, Orange, Westchester and Rockland counties in New York and in Bucks, Montgomery, Philadelphia, Delaware and Chester counties in Pennsylvania. Horizon Dental Option Plan members also have access to over 75,000 participating dentists nationwide.

How can I find a participating dentist?

To find participating dentists, refer to our *Horizon Dental Option Plan Directory of Dentists* or visit our user-friendly Web site, www.HorizonBlue.com, and use the *Quick Dentist Search*. Click on the DENTEMAX box to search for participating dentists nationwide outside New Jersey, New York and Pennsylvania.

What if I use a nonparticipating dentist? Is there an out-of-network benefit?

Yes. There is an out-of-network benefit. If you use a nonparticipating dentist, you will still receive a benefit for eligible services. Nonparticipating dentists have the freedom to charge their normal fees. We pay up to plan allowances. Charges above our plan allowances will be your responsibility. In addition, you may be required to pay at the time of service and submit a claim for reimbursement.

Will I need to submit a claim form every time I go to the dentist?

Most participating dentists will submit a claim for you. Check with your dentist to confirm this.

Will I need to satisfy a deductible?

Please refer to your benefit booklet.

Will I need to pay anything directly to the dentist?

If you use a participating dentist, you will only be responsible for any required copayment and deductible. Nonparticipating dentists have the freedom to charge their normal fees. We pay up to plan allowances. Charges above our plan allowances will be your responsibility. You may be required to pay at the time of service and submit a claim for reimbursement.

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Questions & Answers

Answers to frequently asked questions about the Horizon Dental Option Plan (Cont.)

How do I see a specialist?

You have the freedom to use any specialist. There are no referrals. However, if you use a specialist who participates with the Horizon Dental PPO Network, you can maximize your benefits and save money. Discounts off participating specialists' charges range between 10 and 30 percent.

With an out-of-network option, if you use a nonparticipating specialist, you will still receive a benefit for eligible services. Nonparticipating specialists have the freedom to charge their normal fees. We pay up to plan allowances. Charges above our plan allowance will be your responsibility. You may be required to pay at the time of service and submit a claim for reimbursement.

If I have dental work in progress, can I enroll and will this plan cover those services?

Yes.

Does my plan include orthodontia coverage?

Please refer to your benefit booklet.

Is there a waiting period before I'm eligible for major services?

You may be subject to a six-month waiting period before you become eligible for major services.

Please refer to your benefit booklet.

What if I'm in pain and require emergency dental care?

Always seek appropriate care. Please refer to your benefit booklet.

If I do not choose to enroll at this time, when can I enroll next?

If you do not enroll when you first become eligible, you may need to satisfy an 18-month waiting period before you again become eligible to enroll in this plan. Please refer to your benefit booklet.

Who can I call if I have questions?

Dedicated representatives are available to speak with you, Monday through Friday, from 8 a.m. to 6 p.m., at **1-800-4DENTAL**.

You can also access our Interactive Voice Response (IVR) system, a user-friendly, self-service tool available 24 hours a day, seven days a week, generally including weekends and holidays. You can check claims and enrollment status, order ID cards, locate a dentist or specialist and verify general benefit information.

DENTAL PROGRAMS

QA Questions & Answers

Answers to frequently asked questions about the Horizon Dental Choice (HDC) Plan

Can I go to any dentist?

No. You must choose one of the dentists in the Horizon Dental Choice (HDC) network as your primary care dentist.

How does my plan work?

The HDC Plan covers 100 percent of all eligible preventive and basic services with no copayments, maximums or deductibles when receiving those services from your primary HDC dentist. The HDC plan also covers a significant percent of charges for all eligible major and specialty services. The key to HDC is that care must be coordinated through the participating HDC dentist that you select to use as your primary care dentist.

How can I take the best advantage of my plan?

By using a dentist who participates with the HDC network.

Do I need to choose a primary care dentist?

You must choose a primary care dentist from the HDC network.

Can my family members choose different dentists?

Yes, your eligible dependents may each select a different primary care dentist from the HDC network.

Can I change my primary care dentist?

Your choice of a primary care dentist may change effective on the first day of any month by giving Horizon Blue Cross Blue Shield of New Jersey's dental programs 15-days' notice.

How can I find a participating dentist?

Refer to our directory of dentists or visit our user-friendly Web site, www.HorizonBlue.com, and use the *Quick Dentist Search* to find the names and addresses of participating dentists, detailed door-to-door directions and a street map.

What do I do if my dentist isn't in the network?

Notify us of your dentist's name, and we will attempt to recruit him or her.

What if I use a nonparticipating dentist? Is there an out-of-network benefit?

No.

Will I need to submit a claim form every time I go to the dentist?

No.

Will I need to satisfy a deductible?

No.

Will I need to pay anything directly to the dentist?

You will only be responsible for any required copayment for eligible major and specialty services.

How do I see a specialist?

Your primary care dentist will select a specialist for you and provide you with a referral.

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Questions & Answers

Answers to frequently asked questions about the Horizon Dental Choice (HDC) Plan (Cont.)

If I have dental work in progress, can I enroll and will HDC cover those services?

No. If you have work in progress, you must wait until the work is completed before you can enroll in HDC.

Does my plan include orthodontia coverage?

Please refer to your benefit booklet.

Is there a waiting period before I am eligible for major services?

No.

What if I'm in pain and require emergency dental care?

Always seek appropriate care. Please refer to your benefit booklet.

If I do not choose to enroll at this time, when can I enroll next?

If you do not enroll when you first become eligible, you may need to satisfy an 18-month waiting period before you again become eligible to enroll in this plan. Please refer to your benefit booklet.

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