





Horizon Blue Cross Blue Shield of New Jersey

	In Network	Out of Network
BENEFIT PERIOD	Calendar Year	Calendar Year
NETWORK	Horizon Dental Option	Horizon Dental Option
DEDUCTIBLE	The state of the s	
Individual	\$50	\$50
Family	\$150	\$150
Deductible Applies To	Treatment & Therapy, Endodontics, Periodontics, Oral Surgery, Prosthodontics, Crowns and Onlays	Treatment & Therapy, Endodontics, Periodontic Oral Surgery, Prosthodontics, Crowns and Onlays
BENEFIT PERIOD MAXIMUM	\$2,000 (per person)	\$2,000 (per person)
Strong Smiles included: in-netw	ork preventive/diagnostic services do not apply	to the benefit period maximum
Benefit Period Maximum Applies To	Treatment & Therapy, Endodontics, Periodontics, Oral Surgery, Prosthodontics, Crowns and Onlays	Preventive/Diagnostic, Treatment & Therapy, Endodontics, Periodontics, Oral Surgery, Prosthodontics, Crowns and Onlays
Orthodontics Eligibility	Child/Adult	Child/Adult
Orthodontics	50%	50%
Orthodontics Maximum	\$2,000 (per person)	\$2,000 (per person)
COINSURANCE		
Preventive Diagnostic		
Exam and Preventive Services Exams	100%	100%
Fluoride Treatment	100%	100%
Sealant Application	100%	100%
Adult Prophylaxis	100%	100%
X-rays (Bitewing & Full Mouth)	100%	100%
Space Maintainers	100%	100%
Treatment and Therapy	000/	000/
Amalgam Restorations Composite Restorations	80% 80%	80% 80%
Simple Extractions	80%	80%
Indodontics	0070	30 70
Root Canal Therapy – Anterior & Bicuspid	80%	80%
Root Canal Therapy – Molar	80%	80%
Periodontics		
Scaling & Root Planing	80%	80%
Gingivectomy	80%	80%
Periodontal Maintenance	80%	80%
Osseous Surgery	80%	80%
Oral Surgery		
Surgical Extractions	80%	80%
Partial Bony Extractions	80%	80%
Complete Bony Extractions	80%	80%
Prosthodontics		
Bridgework	50%	50%
Full & Partial Dentures	50%	50%
Denture Adjustments	50%	50%
Denture Repairs	50%	50%
Implants	50%	50%
Crowns and Onlays		
Crown – porcelain fused to high noble metal	50%	50%

Horizon Blue Cross Blue Shield of New Jersey complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, gender, national origin, age, disability, pregnancy, gender identity, sex, sexual orientation or health status in the administration of the plan, including enrollment and benefit determinations.

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

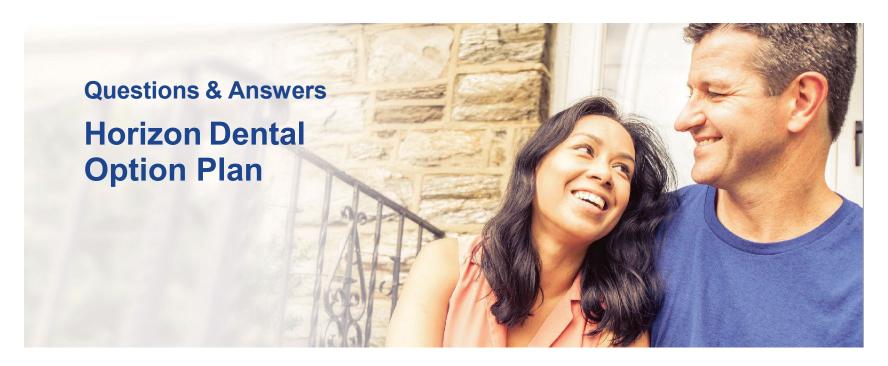
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The **Horizon Dental Option Plan** is the worry-free dental plan. No matter which dentist you choose to visit, you save money. It's just another way Horizon Blue Cross Blue Shield of New Jersey makes dental coverage work for you and your family.

What is the Horizon Dental Option Plan?

The Horizon Dental Option Plan gives you the freedom to receive dental services from any dentist. If you use a dentist who participates with the Horizon Dental Option Plan, you maximize your benefits and save money. Additionally, when you use a dentist who participates in the Horizon PPO Network, you receive deeper discounts and may save even more money. You have the option of selecting from more than 371,000 office locations nationwide.

With an out-of-network option, if you use an out-of-network dentist, you will still receive a benefit for eligible services. Out-of-network dentists may charge up to their normal fees. We reimburse 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 find an in-network dentist?

To find an in-network dentist, go to Horizonblue.com/rwjbarnabashealth and select Find a RWJBarnabas Provider under the Tools & Services menu. Choose RWJBH Doctor & Hospital Finder, then Dentists under What type of care are your looking for? Remember to select Horizon Dental Option as the plan name(In NJ) and National Grid Plus(Outside of NJ).

Can I go to any dentist?

Yes. You can access dental services from any dentist, however, using an in-network dentist will provide you with discounts that allow you to stretch your benefit dollars further and allow you to access more services for less out-of-pocket costs.

Is there an out-of-network benefit if I use an outof-network dentist?

Yes. If you use an out-of-network dentist, you will still receive a benefit for eligible services. Out-of-network dentists may charge up to their normal fees. We reimburse 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.

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

In-network dentists will submit claims for you. Out-of-network dentists may ask you to pay for services and submit a claim for reimbursement.

Will I need to pay the dentist directly?

If you use an in-network dentist, you will only be responsible for any required copayment and deductible.

Out-of-network dentists may charge up to their normal fees. We reimburse 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.

How do I see a specialist?

You have the freedom to use any specialist and there are no referrals. However, when you use a specialist who participates with the Horizon Dental Option Network, Horizon PPO Network or National Grid Plus Network, you maximize your benefits and save money.

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

How Strong Smile Works

In addition to dental cleanings, the services listed below do not count toward your annual maximum dental allowance when performed in network at the same time as a dental cleaning:

- Periodic oral evaluation for an established patient
- •Oral evaluation for patient under three years old and counseling with primary caregiver
- Comprehensive oral evaluation for a new or established patient
- •Bitewing X-rays up to four films
- Vertical bitewing X-rays seven to eight films

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

Yes. You can enroll and the plan will cover the services. Please notify your provider that you are changing dental carriers and Horizon Dental will coordinate with your provider to continue care.

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

No. You do not have a waiting period to be eligible for major services.

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

If you do not enroll when you first become eligible, you may need to wait until the next open enrollment, unless you have a qualifying event. Please refer to your benefit booklet for more information.

Who can I call if I have questions?

Dedicated Customer Service Representatives are available to speak with you. If you have any questions regarding your benefits, you may contact the Horizon Dental Customer Service Department at 1-844-209-4715.



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