

BlueCare[®] Dental PPO Plans



BlueCare Dental Freedom (passive PPO)									Market Segment
Plan Code	Network Status	Benefit Levels	Coverage Allocation	Annual Max	Lifetime Ortho	Ded (ind/fam)	OON Reimbursement		Availability
NHUF04	In/Out	100/80/50/50	High	\$1,500	\$1,500	\$50/\$150	90th U&C		Groups 2 - 50
NHSF10	In/Out	100/80/50/50	High	\$1,000	\$1,000	\$50/\$150	SMA		
NLSF11	In/Out	100/80/50/50	Low	\$1,000	\$1,000	\$50/\$150	SMA		
NLUF16	In/Out	100/80/50/0	Low	\$1,000	N/C	\$50/\$150	90th U&C		
NLUF18	In/Out	100/80/50/0	Low	\$750	N/C	\$50/\$150	90th U&C		
NLSF20	In/Out	100/80/50/0	Low	\$1,000	N/C	\$50/\$150	SMA		Groups 51+
NLUF19	In/Out	80/80/50/0	Low	\$1,000	N/C	\$50/\$150	90th U&C		
NLUF17	In/Out	100/80/50/0	Low	\$1,000	N/C	\$75/\$225	90th U&C		
NHUF15	In/Out	100/80/50/0	High	\$1,000	N/C	\$50/\$150	90th U&C		
NHUF14	In/Out	100/80/50/0	High	\$1,000	N/C	\$25/\$75	90th U&C		
NHUF13	In/Out	100/80/50/0	High	\$1,500	N/C	\$50/\$150	90th U&C		
NHUF12	In/Out	100/80/50/0	High	\$1,500	N/C	\$25/\$75	90th U&C		
NLUF09	In/Out	80/80/50/50	Low	\$1,000	\$1,000	\$50/\$150	90th U&C		
NLUF08	In/Out	100/80/50/50	Low	\$1,000	\$1,000	\$50/\$150	90th U&C		
NHUF07	In/Out	100/80/50/50	High	\$1,000	\$1,000	\$50/\$150	90th U&C		
NHUF06	In/Out	100/80/50/50	High	\$1,000	\$1,000	\$25/\$75	90th U&C		
NHUF05	In/Out	100/80/50/50	High	\$1,500	\$1,000	\$50/\$150	90th U&C		
NHUF03	In/Out	100/80/50/50	High	\$1,500	\$1,500	\$25/\$75	90th U&C		
NHUF02	In/Out	100/80/50/50	High	\$2,000	\$1,500	\$25/\$75	90th U&C		
NHUF01	In/Out	100/80/50/50	High	\$2,000	\$2,000	\$25/\$75	90th U&C		

BlueCare Dental Choice (active PPO)									Market Segment	
Plan Code	Network Status	Benefit Levels	Coverage Allocation	Annual Max	Lifetime Ortho	Ded (ind/fam)	OON Reimbursement		Availability	
NHUC04	In	100/80/50/50	High	\$1,250		\$50/\$150	90th U&C		Groups 2 - 50	
	Out	80/60/50/50	High	\$1,000	\$1,000	\$75/\$225				
NHSC09	In	100/80/50/0	High	\$1,250	N/C	\$50/\$150	SMA			
	Out	80/60/50/0	High	\$1,000	N/C	\$50/\$150				
NLUC08	In	100/80/50/0	Low	\$1,000	N/C	\$50/\$150	90th U&C			
	Out	80/60/50/0	Low		N/C					
NLSC10	In	100/80/50/0	Low	\$1,000	N/C	\$50/\$150	SMA			
	Out	80/60/50/0	Low		N/C					\$75/\$225
NHUC07	In	100/80/50/0	High	\$1,000	N/C	\$50/\$150	90th U&C			Groups 51+
	Out	80/60/50/0	High							
NHUC06	In	100/80/50/0	High	\$1,000	N/C	\$50/\$150	90th U&C			
	Out	90/70/50/0	High							
NHUC05	In	100/80/50/50	High	\$1,000	\$1,000	\$50/\$150	90th U&C			
	Out	80/60/50/50	High							
NHUC03	In	100/80/50/50	High	\$1,000	\$1,000	\$50/\$150	90th U&C			
	Out	90/70/50/50	High							
NHUC02	In	100/90/60/50	High	\$1,000	\$1,000	\$50/\$150	90th U&C			
	Out	100/80/50/50	High							
NHUC01	In	100/90/60/50	High	\$1,500	\$1,000	\$25/\$75	90th U&C			
	Out	100/80/50/50	High						\$1,000	

Notes: Coverage allocation refers to placement of endodontic, periodontic and oral surgery – “high” means coverage at Type II, while “low” means coverage at Type III. For out-of-network reimbursement (OON), Schedule of Maximum Allowances (SMA) means maximum allowable charges are equivalent to the amount which has been contracted with network providers.

Definitions:

- **Schedule of Maximum Allowances (SMA)** – SMA fees are the discounted amounts that dentists in the network are contracted to accept as payment in full for covered services. Members will only be responsible for the coinsurance amount, based on the discounted fee, for covered services. Members will NOT be balance billed the difference between the full billed charge and the discounted fee.
- **Usual and Customary (U & C)** – U & C reimbursement is based on full billed charges from a dentist not contracted with BCBSNM unless the billed charges exceed the reasonable fee amount determined by us. When covered services are received from out-of-network dentists, members’ out-of-pocket expenses may be higher since their coinsurance will be calculated based on the full billed charges. Out-of-network dentists can balance bill for the difference between the full billed charges and the amount paid through BCBSNM. Members may have to submit their own claims when using out-of-network dentists.

BlueCare[®] Dental Freedom PPO
BlueCare[®] Dental Choice PPO

Experience. Wellness. Everywhere.SM



**Blue Cross and Blue Shield
of New Mexico**

Introducing a brand-new portfolio of standard dental PPO benefit plan designs. Our focus is simple: offer employers multiple dental plan designs that allow greater flexibility to best suit their needs at a reasonable price.

BlueCare® Dental Freedom PPO is a passive plan design. Benefits are covered at the same benefit level whether members use in-network providers or out-of-network providers.

BlueCare® Dental Choice PPO is an active plan design. Members receive a higher level of benefits when they use in-network providers.

Key advantages include:

- BlueCare DPPO offers members access to one of the largest dental PPO networks in the state
- Choice of out-of-network reimbursement level at the schedule of maximum allowance or usual and customary at the 90th percentile
- Groups with 2 to 50 employees have a total of 10 plan options (6 Freedom PPO and 4 Choice PPO plans)
- Groups with 51 or more employees have all 30 plan options (20 Freedom PPO and 10 Choice PPO plans)
- Can be offered on a stand-alone basis or coordinated with health benefits
- Coverage for orthodontia services now offered for both children and adults; minimum group size of 2
- Choice of endodontic, periodontic, and oral surgery to be covered as either a basic or major service
- No waiting period for major services

Flexibility of benefit plans:

- Range of deductibles: from \$25 to \$75
- Range of annual maximums: from \$750 to \$2,000
- Coverage allocation: flexibility to cover endodontic, periodontic, and oral surgery as either Type II or Type III services
- Variety of coinsurance options
- Orthodontia services: offered with lifetime maximum options from \$1,000 to \$2,000



BlueCare Dental ConnectionSM

BlueCare Dental Connection is a new program available to BCBSNM members with either dental benefits or medical and dental benefits. By offering online resources and educational programs, BlueCare Dental Connection encourages members to manage their oral health, which may help improve their overall health. For more information about what BlueCare Dental Connection can offer your clients, please contact your BCBSNM representative or visit our website at www.bcbsnm.com.



The new dental plans are available based on group size:

Accounts with 2-50 enrolling employees

- 10 plan options (6 Freedom / 4 Choice)
- Minimum group size of 2 (paired with medical or on a stand-alone basis)

Accounts with 51 or more enrolling employees:

- All 30 plan options available (20 Freedom / 10 Choice)
- Minimum group size of 51 (paired with medical or on a stand-alone basis)

BlueCare Dental At A Glance

Benefits and Services	BlueCare Dental
Network Features	
Network Based	Yes*
Geographic Access	National
Provider Credentialing	Yes
Service Features	
Dedicated Customer Service Unit	Yes
Web site information	www.bcbsnm.com
ID Card	Yes
Funding Arrangement	
Insured	Yes
Self-insured (ASO)	Yes
Group Options	
2 - 50 employees	Standard Plans
51+ employees	Standard or Custom Plans

*BlueCare DPPO Members can visit any dentist; however, greater savings are achieved when covered services are received from an in-network dentist

