

# BlueCare® Freedom Dental Plans



Dental plans offered by Blue Cross and Blue Shield of Texas, (BCBSTX), a division of Health Care Service Corporation, bring brand recognition of the Blue Cross and Blue Shield name to both employers and their employees — a solid reputation for trust and reliability.

BCBSTX offers a choice of standard benefit plan designs and excellent customer service from a dedicated **Dental Service Unit**.

BCBSTX dental products allow you to offer a quality, flexible dental plan at an affordable price, an important part of both employee and member satisfaction.



BlueCross BlueShield  
of Texas

## Overview of Standardized **BlueCare Freedom Dental Plans\***

	D501	D601	D602	D701	D702	D811	D821	D822	D801	D802	D803
<b>Group Size</b>	<b>2+</b>	<b>2+</b>	<b>2+</b>	<b>10+</b>	<b>10+</b>	<b>10+</b>	<b>10+</b>	<b>10+</b>	<b>10+</b>	<b>10+</b>	<b>10+</b>
<b>Diagnostic and Preventive Care Benefits</b>	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
<b>Miscellaneous Services (Labs and Tests/Sealants thru age 16)</b>	80%	80%	80%	80%	80%	100%	100%	100%	100%	100%	100%
<b>Space Maintainers/Palliative</b>											
<b>Restorative Services (including Simple Extractions)</b>	80%	80%	80%	80%	80%	80%	80%	80%	80%	80%	80%
<b>General Services (Anesthesia, Stainless Steel Crowns)</b>	Not Covered	50%	50%	50%	50%	80%	80%	80%	80%	80%	80%
<b>Endodontic Services</b>	Not Covered	50%	50%	50%	50%	80%	80%	80%	80%	80%	80%
<b>Periodontal Services</b>	Not Covered	50%	50%	50%	50%	80%	80%	80%	80%	80%	80%
<b>Oral Surgery Services</b>	Not Covered	50%	50%	50%	50%	80%	80%	80%	80%	80%	80%
<b>Crowns, Inlays/ Onlays Services, Implants**</b>	Not Covered	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%
<b>Prosthodontic Services</b>	Not Covered	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%
<b>Orthodontic Benefits (Adult &amp; Child)</b>	Not Covered	Not Covered	Not Covered	50%	50%	Not Covered	50%	50%	50%	50%	50%
<b>Deductible</b>	\$25/\$75	\$50/\$150	\$50/\$150	\$50/\$150	\$50/\$150	\$50/\$150	\$50/\$150	\$50/\$150	\$50/\$150	\$50/\$150	\$50/\$150
Deductible waived for Prevention and Diagnosis	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
<b>Annual Maximum</b>	\$750	\$1,000	\$1,500	\$1,500	\$1,500	\$1,000	\$1,500	\$1,500	\$1,500	\$2,000	\$2,000
<b>Ortho Lifetime Maximum</b>	Not Applicable	Not Applicable	Not Applicable	\$1,000	\$1,500	Not Applicable	\$1,000	\$1,000	\$1,500	\$1,500	\$2,000
<b>Waiting Periods</b>	None	None	None	None	None	None	None	None	None	None	None

\*Amounts shown are paid by the Plan. BlueCare Freedom Dental pays up to the allowable amount.

\*\* Implants covered on Plans D701, D702, D801, D802, D803, D811, D821