

# Adult Dental Plan Comparison Guide — Individual

Pediatric dental benefits are an essential health benefit included in most ACA-compliant medical plans, but the benefits expire when the member turns 19 years old. Independence Blue Cross (Independence) is the only area health insurer to offer standalone adult dental plans so that once enrolled, members can continue dental coverage after their pediatric dental benefits expire.

Starting January 1, 2016, we will introduce two new adult dental plans that will replace our existing adult dental plans:

- Adult Plus Dental will be retired and replaced with [Adult Dental PPO Preferred](#)
- Adult Prime Dental will be retired and replaced with [Adult Dental PPO Premier with Preventive Incentive](#)

We will not sell any new Adult Plus or Adult Prime Dental plans as of January 1, 2016. Existing members will be transitioned to one of the new dental plans at renewal.

## Frequently Asked Questions

**Q. Why are we retiring the Adult Plus plan and Adult Prime plan and offering two new plans — Adult Preferred and Adult Premier?**

- A. Our goal is to serve our customers and members with products that meet their needs. Feedback from recent market research showed that members want richer plans that provide broader coverage. As a result, we've created two market-competitive plans with the benefits and coverage that members are looking for:
- Adult Dental Preferred PPO (NEW) covers diagnostic and preventive services as well as additional services, including fillings, root canals, and more.
  - Adult Dental Premier PPO with Preventive Incentive (NEW) offers the most comprehensive coverage and richest benefits. Certain services, including exams, cleanings, and X-rays, do not count toward the annual benefit maximum, giving members even more value.

**Q. What is unique about our standalone dental plans?**

- A. Though some family dental plans can provide additional pediatric benefits beyond what is covered in an ACA medical plan, they can also create redundancy. This means members may end up paying for some benefits that they already have as part of their essential health benefits. Instead, our standalone adult dental plans allow members to transition from pediatric dental coverage, which ends at age 19, to adult dental coverage, avoiding redundant coverage.

**Q. Will existing Adult Plus and Adult Prime plan members have to choose a new dental plan?**

- A. Yes. Adult Plus and Adult Prime plan members will be asked to choose a new dental plan at renewal. If no plan is chosen, members will be automatically renewed into one of the new dental plans depending on their prior coverage. Until their 2016 renewal date, members will be able to continue to use their current Adult Plus or Adult Prime dental plan.

**Q. Will bundles still be offered?**

- A. Yes. Members can choose from the following dental and vision bundles. Members who purchase the dental and vision plans at the same time will receive a discount on the vision premium. Members transitioning into one of the new dental plans from Adult Plus or Adult Prime will also be eligible for the vision premium discount (if originally purchased together).
- Adult Dental Preferred and Vision Care 100
  - Adult Dental Preferred and Vision Care 180
  - Adult Dental Premier and Vision Care 180

**Q. Where can members find in-network dentists? (Concordia Advantage network)**

- A. Members can go online to [ibx4you.com/dentalprovider](http://ibx4you.com/dentalprovider) to find dentists in their area.

## Comparison of plans for individual consumers

	NEW PLAN		OLD PLAN		NEW PLAN		OLD PLAN	
	Adult Dental Preferred PPO		Adult Plus Dental PPO		Adult Dental Premier PPO with Preventive Incentive		Adult Prime Dental PPO	
Dental deductible	Member: \$50 Family: \$150		\$0		Member: \$50 Family: \$150		Member: \$50 Family: \$150	
Annual maximum dental benefit per insured member	\$1,000		\$500		\$1,000		\$1,000	
Benefits	Waiting Period	Member Pays <sup>1</sup>	Waiting Period	Member Pays <sup>1</sup>	Waiting Period	Member Pays <sup>1</sup>	Waiting Period	Member Pays <sup>1</sup>
Oral Evaluations (Exams)	None	\$0	None	\$0	None	\$0 <sup>2</sup>	None	\$0
Radiographs (X-rays)	None	\$0	None	\$0	None	\$0 <sup>2</sup>	None	\$0
Prophylaxis (Cleanings)	None	\$0	None	\$0	None	\$0 <sup>2</sup>	None	\$0
Palliative Treatment (Emergency)	None	\$0	None	\$0	None	\$0 <sup>2</sup>	None	\$0
Space Maintainers	None	50%	Not covered	Not covered	None	20% <sup>2</sup>	Not covered	Not covered
Amalgam Restorations (Metal fillings)	6 mos.	50%	6 mos.	40%	6 mos.	20%	6 mos.	20%
Resin-based Composite Restorations (White fillings)	6 mos.	50%	6 mos.	40%	6 mos.	20%	6 mos.	20%
Crowns, Inlays, Onlays	Not covered	Not covered	Not covered	Not covered	12 mos.	50%	12 mos.	50%
Crown Repair	12 mos.	50%	Not covered	Not covered	12 mos.	20%	12 mos.	50%
Endodontic Therapy (Root canals, etc.)	12 mos.	50%	12 mos.	40%	12 mos.	20%	12 mos.	50%
Other Endodontic Services	12 mos.	50%	12 mos.	40%	12 mos.	20%	12 mos.	50%
Surgical Periodontics	12 mos.	50%	Not covered	Not covered	12 mos.	20%	12 mos.	50%
Non-Surgical Periodontics	12 mos.	50%	Not covered	Not covered	12 mos.	20%	12 mos.	50%
Periodontal Maintenance	12 mos.	50%	Not covered	Not covered	12 mos.	20%	12 mos.	50%
Prosthetics (Complete or Fixed Partial Dentures)	Not covered	Not covered	Not covered	Not covered	12 mos.	50%	12 mos.	50%
Adjustments and Repairs of Prosthetics	12 mos.	50%	Not covered	Not covered	12 mos.	20%	12 mos.	50%
Other Prosthetic Services	Not covered	Not covered	Not covered	Not covered	12 mos.	50%	12 mos.	50%
Simple Extractions	None	50%	None	40%	None	20%	None	20%
Surgical Extractions	None	50%	None	40%	None	20%	None	50%
Oral Surgery	12 mos.	50%	12 mos.	40%	12 mos.	20%	12 mos.	50%
General Anesthesia, Nitrous Oxide, and/or IV Sedation	12 mos.	50%	Not covered	Not covered	12 mos.	20%	12 mos.	50%
Consultations	None	\$0	None	\$0	None	\$0	None	\$0

<sup>1</sup> Coverage is based on the Maximum Allowable Charge (MAC) for the specific covered service. Participating dentists accept contracted MACs as payment in full for covered services. Non-participating dentists do not limit their charges and may bill you for the difference between their charge and the benefit paid by the Policy.

<sup>2</sup> Included in the Preventive Incentive. The amount paid by the plan (benefit) does not count toward the member's annual maximum.

Note: For non-covered services, discounts may be available from participating network dentists.

