

# Q&A Questions & Answers

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

### What is the Horizon Dental Choice Plan?

The Horizon Dental Choice (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 Horizon Dental Choice dentist. The key to the HDC plan is that care must be coordinated through the participating HDC dentist who you select as your primary care dentist.

### 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 and receive care, or be referred for care, from that 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 who you select as your primary care dentist. There is no out-of-network benefit for Horizon Dental Choice.

### How can I best take advantage of my plan?

You can best take advantage of your plan by using a dentist who participates with the HDC network.

### Do I need to choose a primary care dentist?

Yes, 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 Dental Programs 15-days' notice.

### How can I find a participating dentist?

To find a participating dentists, visit our user-friendly online *provider directory*, [HorizonBlue.com/Directory](http://HorizonBlue.com/Directory), and use the *Dentist* search to find the names and addresses of participating dentists, detailed door-to-door directions and a street map or refer to our Directory of Dentists.

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

If your current dentist is not in the network, notify us of your dentist's name, and we will attempt to recruit him or her.

*(over, please)*



Horizon Blue Cross Blue Shield of New Jersey

*Making Healthcare Work*

See plan document for a complete description, including limitations, exclusions and waiting periods.

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

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

No. There are no out-of-network benefits under your HDC Plan.

### **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 provide you with a referral. Please call Dental Customer Service at **1-800-4DENTAL (1-800-433-6825)** for help selecting a participating specialist in the PPO Network.

### **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 for more information.

### **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 for more information.

### **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 satisfy a waiting period before you again become eligible to enroll in this plan. 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, Monday through Friday, between 8 a.m. and 8 p.m., Eastern Time. If you have questions or need help selecting a dentist who's right for you, call us at **1-800-4DENTAL (1-800-433-6825)**.

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.