

Q&A Questions & Answers

Answers to frequently asked questions about the Horizon Dental PPO Access Plan

What is the Horizon Dental PPO Access Plan?

The Horizon Dental PPO Access Plan covers dental services that you will use and value. The plan provides 100 percent coverage for the most frequently needed dental services. It's just another way Horizon Blue Cross Blue Shield of New Jersey makes dental care work for you and your family.

Can I go to any dentist?

Yes.

How does my plan work?

In Network: The plan covers frequently needed, eligible preventive and diagnostic services, such as exams, cleanings and X-rays, as well as amalgam (silver) fillings and space maintainers, at 100 percent. For eligible remaining basic services and all major or specialty services, such as root canals, crowns and bridges, you'll pay only a reduced Horizon Dental PPO Plan allowance to participating dentists. There is no annual deductible, no annual maximum and no waiting period for major services.

Out of Network: The plan allows you to use nonparticipating dentists for certain eligible preventive and diagnostic services, as well as silver fillings and space maintainers. However, you may have to pay for any charges above the Horizon Dental PPO Plan allowance, pay dentists at the time of service and submit claims for reimbursement. There is no out-of-network benefit for remaining basic services and all major or speciality services.

How can I best take advantage of my plan?

You'll make the most of your benefits by using a dentist who participates with the Horizon Dental PPO Access Plan.

Where are participating dentists located?

As a member, you'll have access to an extensive network of participating dentists in our regional service area, including all 21 counties of New Jersey.

How can I find a participating dentist?

To find a participating dentist, visit our user-friendly online *provider directory*, 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 *Horizon Dental PPO Plan Directory of Dentists*.

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

Most participating dentists will submit a claim for you. Check with your dentist to confirm this. You may be required to pay at the time of service and submit a claim for reimbursement.

Will I need to satisfy a deductible?

No.

(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 PPO Access Plan *(continued)*

Will I need to pay the dentist directly?

While participating dentists accept our plan allowances as payment in full, nonparticipating dentists may charge up to their normal fees. We reimburse up to plan allowances. Charges above plan allowances will be your responsibility. You may be required to pay at the time of service and submit a claim for reimbursement if you use a nonparticipating dentist.

How do I see a specialist?

You can use any specialist in the Horizon Dental PPO Network and receive a discounted rate.

Does my plan include orthodontic coverage?

Orthodontic coverage may be available to a member from a participating dentist at a discounted fee. The member must pay all discounted fees directly to the participating dentist.

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 do not choose 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 an 18-month 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 **1-800-4-DENTAL (1-800-433-6825)**.

You can also access our Interactive Voice Response 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.