ND

BlueDental℠ Elite

Deductible Amount (Per Benefit Period)
$50 per member | $100 per family
Claims for covered services incurred Oct. 1 - Dec. 31 include a deductible carry-over to the next year

Annual Maximum (Per Benefit Period)
$1,500 per member

Orthodontic Services and Maximum
Not covered

Services	Percent paid by your plan after deductible is met	Description
Diagnostic	100%[3]	Exams (oral evaluations): Two per calendar year[1]
Radiographs	100%[3]	Bitewing X-rays: One set per calendar year[1] Full mouth X-rays or panoramic X-rays: Once every five years[1] Occlusal films[1]
Preventive	100%[3]	Cleanings (prophylaxis): Four per calendar year[1 2] Fluoride varnish: Two per calendar year[1] Topical fluoride: Two per calendar year[1]
	80%	Sealants Space maintainers
Restorative	80%	Amalgam restorations (silver fillings) Resin-based composite - anterior & posterior (white fillings)
	50%	Single and stainless-steel crowns and repairs Inlays, onlays and repairs
Endodontic	80%	Endodontic therapy (root canals, etc.) Root canal retreatment Apicoectomy/periradicular (root surgery)
Periodontal	80%	Surgical/nonsurgical periodontics Periodontal maintenance
Prosthodontic	50%	Removable complete and partial dentures Fixed partial dentures (bridges) Adjustments/repairs of complete/partial dentures
Implant	50%	Surgical placement Supporting structures Treatment of implant defects Fixed partial/removable denture
	100%[3]	Cone-beam CT images[1]: One per tooth per lifetime
Removal of Teeth	80%	Simple and surgical extractions
	50%	Complex oral surgery
Adjunctive General	80%	Consultations General anesthesia, nitrous oxide and/or IV sedation
	100%[3]	Palliative treatment (emergency)[1]

[1]Covered service does not apply to benefit maximums.
[2]One additional for members under the care of a medical professional during pregnancy.
[3]Deductible does not apply.

Protect your smile and budget with a plan built for you

Your BlueDental benefits include:

Broad access to dentists
Easy-to-find care close to home or while traveling

Network

260 dentists
across North Dakota

67,670 dentists
across the country

Serving

400 locations
across North Dakota

250,813 locations
across the country

Saving

You and your employees money
when they visit a participating dentist

Lower, predictable costs
when you use in-network providers

100% coverage
Exams | X-rays | Cleanings

No waiting periods
All services available from day one

Up to four cleanings covered per year

Expanded procedure coverage
Preexisting missing teeth | Implants
Orthodontic options | Crowns | Bridges

Find providers, virtual care options and care support programs using the Find Care tool located within BCBSND.me.

To qualify for a group dental plan, the employer must contribute a minimum of 50% toward the single-premium payment.
This chart presents a brief explanation of the covered services and payment levels of this product. It should not be used to determine whether your dental expenses will be paid. The written benefit plan governs the benefits available. For further details of the coverage, including exclusions, reductions or limitations and the terms under which the benefit plan may be continued, see your sales and account executive or write to Blue Cross Blue Shield of North Dakota. For the list of exclusions and limitations, refer to the written benefit plan.
This information is available to individuals with disabilities in alternate formats, free of charge, by calling Member Services at 844-653-4056 (toll-free) or through the North Dakota Relay at 800-366-6888 or 711.
United Concordia Companies, Inc. is an independent company providing dental benefit administrative services and access to a provider network for Blue Cross Blue Shield of North Dakota dental products.
Information applies to fully insured and self-funded groups
Self-funded groups: This dental plan is that of your employer. Blue Cross Blue Shield of North Dakota is serving only as the claims administrator.

Scan the QR code to view the non-discrimination notice or visit nd.blue/non-discrimination-notice

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