DENTAL PLANS

Horizon

Horizon Dental Option Plus Plan (DOP)

100 / 80 / 50	$50	$2,000	$2,000
Coinsurance	Deductible	Annual Max.	Ortho

Gibbons PC

Coverage Type	In Network	Out of Network
Preventive (cleanings, oral exams, bitewing X-rays)	100%	80%
Basic (fillings, extractions)	80%	80%
Major (bridges, dentures, crowns)	50%	50%
Basic & Major Deductible Does not apply to preventive/diagnostic	$50 $150 Individual/Family	$50 $150 Individual/Family
Annual Maximum per Calendar Year Combined in- and out-of-network	$2,000 Preventive and Diagnostic does not go towards the annual deductible	$2,000
Orthodontia Combined in- and out-of-network Child Only	$2,000 50%	$2,000 50%
Benefit Waiting Period	None	None
COVERED PREVENTIVE SERVICES		
Cleanings/Oral Exams	3x per calendar year	
Bitewing X-Rays (set of 4)	2x per calendar year	
Fluoride	Up to age 19 1x in 6 months	
Sealants	Up to age 14 1st and 2nd molars only; 1x in 36 months	

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Coverage Type	In Network	Out of Network
COVERED BASIC SERVICES		
Fillings Composite and Amalgam	Replacement once per 6 months per tooth	
Space Maintainers	Up to age 19	
Oral Surgery	As required except for simple extractions	
Deep Cleaning for Gum Disease	1x per calendar year	
X-Rays	1x in 36 months	
COVERED MAJOR SERVICES		
Crowns/Inlays/Onlays	Replacement once per 60 months	
Bridges/Dentures	Replacement once per 60 months	
General Anesthesia	When dentally necessary in connection with oral surgery, extractions or other covered dental services	
Implants	Not Covered	

FAQs

Who is a participating dentist?
A participating dentist is a general dentist or specialist who has agreed to accept negotiated fees as payment in full for covered services provided to plan members.

Can I find out what my out-of-pocket expenses will be before receiving a service?
Yes. You can ask your dentist to get a pretreatment estimate from Horizon. Your participating general dentist or specialist will send Horizon a plan for your care and will request an estimate of benefits. The estimate helps you prepare for the cost of dental services.

Do I need an ID card?
No. You do not need to present an ID card to confirm that you are eligible. You should notify your dentist that you are enrolled in the Horizon Dental Option plan.

May I choose a non-participating dentist?
The Horizon Dental Option plan offers coverage for both in- and out-of-network dentists. Out-of-network providers are paid on a

80th of Fair Health

How do I find a participating dentist?
To locate a participating provider, please utilize the doctor finder at **horizonblue.com/doctorfinder** or by calling **1-800-4-Dental**. Simply log in or continue as a guest, select dental, select the Horizon Dental Option plan, input any location nationwide, select the dentist, specialty or group practice and the results will automatically generate based on the network(s) your plan belongs to.

Dependent Age: 26

Student Age: 26

*Payment is based upon the Horizon allowance and the provider may bill the member up to charges.

Out-of-network doctors and other health care professionals can bill you for the difference between the charges Horizon has agreed to pay and the actual charge for the service.

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