



Horizon Healthy Smiles Plus Plan (D2942)

100/80/50/50, \$50 Deductible, \$1,000 Annual Max

| Coverage Type | In Network Only |
|--------------------------------------------------------------------------------|----------------------------------------|
| Preventive (cleanings, oral exams, bitewing X-rays) | 100% |
| Basic Restorative Services | 80% |
| Basic (fillings, extractions) | 50% |
| Major (bridges, dentures, crowns) | 50% |
| DEDUCTIBLE | |
| Basic & Major Deductible Does not apply to preventive/diagnostic | \$50/\$150 Individual/Family |
| Annual Maximum per Calendar Year | \$1,000 |
| Orthodontia | Not covered |
| Benefit Waiting Period | None |
| COVERED PREVENTIVE SERVICES | |
| Cleanings/Oral Exams | 2x per calendar year |
| Bitewing X-Rays (set of 4) | 2x in 2 years |
| Fluoride | Up to age 19; 1x in 2 years |
| Sealants | Up to age 14; 1x per lifetime |
| BASIC RESTORATIVE SERVICES | |
| Amalgam Restorations | Replacement once per 2 years per tooth |
| Composite Restorations | Replacement once per 2 years per tooth |

DENTAL PLANS



Coverage Type

In Network Only

COVERED BASIC SERVICES

Space Maintainers

Up to age 14

Oral Surgery

As required except for simple extractions

Deep Cleaning for Gum Disease

1x in 2 years

X-Rays

1x in 5 years

COVERED MAJOR SERVICES

Crowns/Inlays/Onlays

Replacement once per 7 years

Bridges/Dentures

Replacement once per 7 years

General Anesthesia

When dentally necessary in connection with oral surgery, extractions or other covered dental services

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 for a pretreatment estimate. Your 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 Healthy Smiles Plus plan.

May I choose a non-participating dentist?

The Horizon Healthy Smiles Plus plan offers coverage for in-network benefits only and choosing a non-participating dentist will result in full out of pocket responsibility.

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 Healthy Smiles Plus 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.

EXCLUSIONS

Please review contract for full list of exclusions

Periodontal Splinting | Implants | Services relating to TMJ | Replacement of lost, stolen or broken space maintainers

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

Plan ID Code: D2942

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ECNA005425 (1221)