



LIBERTY Member Services:
866-544-4350 TTY: 877-855-8039

Blue Medicare AdvantageSM

Comprehensive Dental Plan

<ul style="list-style-type: none"> No Deductible Frequencies and Limitations Apply* In-Network Benefits Only 	Calendar Year Maximum: \$2,000
Covered Services	Member Cost
Diagnostic Services Oral evaluations, full mouth radiographic images, bitewings, periapical radiographs	\$0
Preventive Services Prophylaxis, topical application of fluoride (excluding varnish)	\$0
Restorative Services Amalgam restorations, resin-based composite restorations, onlays, inlays, crowns, core buildups	\$0
Endodontic Services Endodontic therapy, retreatment of root canal therapy, apicoectomy	\$0
Periodontal Services Periodontal scaling and root planing, full mouth debridement, periodontal maintenance, gingivectomy, osseous surgery, tissue graft	\$0
Removable Prosthodontics Services Complete dentures, partial dentures, denture repairs, relines, tissue conditioning, overdentures	\$0
Oral & Maxillofacial Services Extractions, impacted tooth removal, alveoloplasty	\$0
Additional Services Palliative treatment, sedation, nitrous, consultation, teledentistry	\$0

This Benefit Highlights Sheet is only a summary of the dental plan.

*Visit <https://medicare.bluecrossnc.com/medicare/forms-library> to access your Evidence of Coverage for a full list of dental benefits, frequencies and limitations.

Dental benefits are only available if they are provided by a contracted LIBERTY provider. Please check with your dental office before receiving services to make sure the office is a LIBERTY provider.

To find a network dentist near you, go to: www.libertydentalplan.com/bcbsnc

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