



# Braven Health Dental Benefit

## \$0 Deductible, \$1,000 Annual Max<sup>1</sup>

Coverage Type	In-Network Cost	Out-of-Network Cost*
<b>Preventive</b> (Cleanings, oral exams, bitewing X-rays)	\$0	Braven will pay up to the allowed amount, additional provider charges will apply
<b>Comprehensive Coverage</b> (Restorative, endodontics, periodontics and extractions)	50% of allowed amount up to the \$1,000 annual maximum	50% of allowed amount up to the \$1,000 annual maximum, additional provider charges will apply
<b>COVERED PREVENTIVE SERVICES</b>		
<b>Cleanings/Oral Exams</b>	3x per calendar year	
<b>Bitewing X-rays</b> (set of 4)	1x per 6 months	
<b>Full Mouth X-rays</b>	Up to 1x per 3 years	
<b>Fluoride</b>	1x per 6 months	
<b>COVERED COMPREHENSIVE SERVICES</b>		
<b>Fillings</b> (Composite and amalgam)	Replacement 1x per 6 months per tooth	
<b>Extractions</b>	Simple and non-impacted extractions	
<b>Periodontal Maintenance</b>	1x per 6 months <sup>2</sup>	
<b>Periodontal Root Planing</b>	Up to 1x per calendar year	
<b>Root Canal Therapy</b>	As necessary per our administrative guidelines <sup>2</sup>	
<b>General Anesthesia</b>	When necessary in connection with extractions or other covered dental services <sup>2</sup>	
<b>Non-Covered Services include but are not limited to:</b>		
Crowns/inlays/onlays, dentures, implants, orthodontics, sealants, space maintainers, missing teeth, services related to Temporomandibular Joint Dysfunction (TMJ), oral/maxillofacial surgery and prosthodontics		

# Frequently Asked Questions

## Who is a participating dentist?

A general dentist or specialist who has agreed to accept certain payments as payment in full for covered services provided to Braven Health members.

## How do I find a participating dentist?

Visit [BravenHealth.com/find-doctor](https://BravenHealth.com/find-doctor) or call **1-855-648-1405** (TTY **711**).

## What is the Member Services phone number?

**1-855-648-1405** (TTY **711**), weekdays, 8 a.m. to 8 p.m., Eastern Time.

## Can I find out what my out-of-pocket expenses will be before receiving a service?

Yes. Ask your dentist for a pre-determination before your service, which is an estimate and not a guarantee of approval or payment from Braven Health. Your dentist can find the necessary forms at [BravenHealth.com/members/forms/dental](https://BravenHealth.com/members/forms/dental).

## What network do I have access to?

You have access to the Braven Health network.

## \* May I choose a non-participating dentist and go out of network for covered services?

The Braven Health dental benefit offers coverage for both in- and out-of-network dentists. However, out-of-network dentists are not obligated to accept Braven Health payment rates as payment in full. This means you will be responsible for the difference between the amount Braven Health pays your dentist and the amount your dentist charges for the service(s). As a result, your out-of-pocket costs will be higher when you use an out-of-network provider.

## Where do I file claims?

Your dentist should file a claim directly to Braven Health. If they do not, download a form from [BravenHealth.com/members/forms/dental](https://BravenHealth.com/members/forms/dental), and have the dentist fill it out. Submit completed claim forms to Braven Health Dental Claims, PO Box 1311, Minneapolis, MN 55440.



[BravenHealth.com](https://BravenHealth.com)

<sup>1</sup> \$1,000 annual maximum applies to comprehensive services only.

<sup>2</sup> Dental services are subject to our standard claims review procedures, which could include dental history to approve coverage. Administrative guidelines for clinical review can be found here: [dental.horizonblue.com/dentists/dental-policies](https://dental.horizonblue.com/dentists/dental-policies).

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