



Mine Hill Board of Education Group# 96842

Horizon Blue Cross Blue Shield of New Jersey

Making Healthcare Work.

		Dental Option Plan
Annual Deductible		\$0 per person
Out-of-network		Yes
Annual Maximum		\$1,000
COVERED SERVICES		OUT-OF-POCKET COSTS
Exams and Preventive Services Exams*	All exams Fluoride treatment (child) Sealant application Prophylaxis	0%
X-rays*	Panoramic Full-mouth X-rays	0%
Space maintainers	Space maintainer – fixed unilateral/bilateral	0%
Restorations and Repairs	Amalgam restorations Composite restorations (other than for molars) Denture adjustments and repairs	20%
Endodontics	Pulp cap/Pulpotomy Root canal therapy – anterior, bicuspid, molar	20%
Periodontics	Scaling and root planing Gingivectomy Soft tissue grafts Periodontal maintenance Osseous surgery	20%
Oral Surgery	Routine extractions Soft tissue surgical extractions Incision and drainage of abscess Surgical extractions – impacted	20%
COVERED SERVICES		OUT-OF-POCKET COSTS
Major Restoration	Crowns	50%
Dentures	Complete and partial dentures	50%
Fixed Bridges	Retainers and pontics	50%

Services are for illustrative purposes only. For complete listing of covered services, plan limitations, deductibles and maximums, consult your benefit booklet.