



New York State Dental Plan Student Employee Health Plan (SEHP) Your Summary of Benefits

WELCOME TO YOUR DENTAL PLAN!

This benefit summary outlines how your dental plan works and provides you with a quick reference of your dental plan benefits.

Covered Services

Please see summary below for services covered by the New York State Dental Plan SEHP.

| Dental Services (per Covered Individual) | In-Network Anthem Pays: | Waiting Period |
|---|------------------------------|-------------------|
| Diagnostic and Preventive Services | \$20 Copayment (per visit) | No waiting period |
| Periodic oral exam: two per calendar year Teeth cleaning (prophylaxis): two per calendar year Bitewing x-rays: one set per calendar year for all ages | | |
| Basic Services | \$10 Copayment (per filling) | No waiting period |
| • Fillings: two per calendar year (either amalgam or composite) | | |

Other Services

- For all non-covered services under the SEHP Dental Plan, you can select a provider that participates in the Anthem Discount Card Program. Under the program, you will receive pre-approved discounted rates for services that are not covered under your insurance plan. You are required to pay your participating Anthem Discount Card Program provider directly for all care you receive.
- When you visit an Anthem Discount Card Program provider for services that are not covered under your plan, the participating provider charges you less than their normal fee.
- You will not be subject to pre-certification, eligibility verification, or other procedures associated with traditional fee-for-service programs when you utilize the discounted program.

Finding a participating dentist is easy.

- Visit anthembluecross.com/nys-dental and select "New York State Dental Plan Student Employee Health Plan (SEHP)" under Search for a Dental Provider. You will be directed to the XPO Dental Complete network where you can search for providers by address, doctor name, or specialty type. For non-covered services, you can additionally filter network results or select the link for "Dental Discount Card Program Providers" to view providers who may charge you less than their normal fee.
- Call the dedicated Anthem New York State Dental Plan customer service team at 1-833-821-1949.

TO CONTACT US

| Call | Write | Online |
|--|---|--|
| Contact the dedicated Anthem New York State Dental Plan customer service team by calling 1-833-821- 1949 . The team is available Monday through Friday 8:00AM to 5:00PM Eastern Standard Time. | Refer to the back of your plan ID card for the address. | To view plan documents, including this Summary of Benefits, please visit the NYSHIP website at www.cs.ny.gov/employee- benefits/login. For details about your benefits and rights and responsibilities as a member, to get the most from your dental plan, visit anthembluecross.com/nys- dental. |





| Limitations & Exclusions |
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| Limitations – Below is a partial listing of dental plan limitations when these services are covered under your plan. | Exclusions – Below is a partial listing of noncovered services under your dental plan. |
|---|---|
| Diagnostic and Preventive Services (per Covered Individual) <u>Oral evaluations (exam)</u> – Limited to two per calendar year <u>Teeth cleaning (prophylaxis)</u> – Limited to two per calendar year <u>Bitewing x-rays</u> – One set per calendar year for all ages Basic Services <u>Fillings</u> – Limited to two per calendar year | Services provided before or after the term of this coverage – Services received before your effective date or after your coverage ends. Orthodontics (unless included as part of your dental plan benefits) – Orthodontic braces, appliances and all related services Cosmetic dentistry – Services provided by dentists solely for the purpose of improving the appearance of the tooth when tooth structure and function are satisfactory and no pathologic conditions (cavities) exist Drugs and medications – Intravenous conscious sedation, IV sedation and general anesthesia when performed with nonsurgical dental care Analgesia, analgesic agents, anxiolysis nitrous oxide, therapeutic drug injections, medicines or drugs for nonsurgical or surgical dental care except that intravenous conscious sedation is eligible as a separate benefit when performed in conjunction with complex surgical services. Extractions – Surgical removal of third molars (wisdom teeth) that do not exhibit symptoms or impact the oral health of the member. |

Coordination of Benefits: You are eligible for coordination of benefits with other group dental plans under which you or your covered dependents are eligible. This process helps to keep the cost of the plan reasonable. Upon claim submission, please provide Anthem any other coverage information if this SEHP plan is not primary coverage for you.

For eligibility questions, please contact your Health Benefits Administrator.