

Bossier Parish School Board Blue Dental Plan **2025**

Benefits		
Calendar Year Deductible Per Member/Per Family ¹	\$50/\$100 Not Applied to Diagnostic & Preventive Services	
Annual Benefit Maximum Per Member (In-Network & Out-of-Network)	\$1,000	
Out-of-Pocket Yearly Max Per Member/Per Family	Unlimited	
Lifetime Maximum Orthodontia Per Member (Up to Any Age)	\$1,000	
Covered Services	Contract Pays	
Diagnostic and Preventive Services	Benefit Coinsurance	Frequency Limitation
Routine Oral Exams		
• Comprehensive Oral Evaluation	100%	
• Periodic Oral Evaluation	100%	2 per calendar year 1 every 6 months
• Limited Oral Evaluation	100%	
• Detailed Oral Evaluation	100%	
Cleanings	100%	2 per calendar year 1 every 6 months
Oral X-Rays		
• Full Mouth X-Rays	100%	1 per 2 years
• Bitewing X-Rays	100%	1 per 6 months
• Intraoral Periapical X-Rays	100%	
• Intraoral Occlusal X-Rays	100%	
Fluoride Treatments (under age 19)	100%	1 per calendar year
Sealants (under age 19)	100%	Permanent teeth only
Palliative Treatment (Emergency)	100%	
Basic Services	Benefit Coinsurance	Frequency Limitation
Space Maintainers	80%	1 per 3 years
Basic Restorative (Amalgam, Resin Fillings)	80%	
Extractions – Simple/Surgical	80%	
Oral Surgery (Includes TMJ)	80%	
General Anesthesia/Sedation	80%	See contract for details
Endodontics		
• Root Canal	80%	
• Pulpal Therapy	50%	

¹Does not apply to Diagnostic and Preventive Services. | This is not a certificate of insurance. It is a brief description of benefits only. The group policy alone determines all rights and benefits. Administered by Concordia Companies, Inc., Advantage Plus Network is used for Certified Group products; Advantage Plus 2.0 Network for Traditional Group products. United Concordia is an independent company that administers dental benefits on behalf of Blue Cross and Blue Shield of Louisiana members.

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Basic Services (Continued)	Benefit Coinsurance	Frequency Limitation
Periodontics		
• Full Mouth Debridement	80%	
• Periodontal Maintenance	80%	
• Scaling and Root Planing	80%	
• Surgical Procedures	80%	
• Guided Tissue Regeneration	80%	
Major Services	Benefit Coinsurance	Frequency Limitation
Prosthetics (Bridges, Dentures)		
• Denture Relining	50%	1 per 3 years
• Denture Adjustments	50%	1 per 6 months
• Recementation of Bridge	50%	
• Replacement of Dentures	50%	1 per 3 years
Inlays, Onlays and Crowns		
• Crowns	50%	
• Recementation of Crowns	50%	
Orthodontia (Traditional – Up to Any Age)	50%	\$1,000 lifetime maximum

Network: Advantage Plus 2.0

Benefits

- Authorization for orthodontic services is required.
- Blue Dental benefits are the same for in- and out-of-network.
- Assignment of benefits can be made to pay out-of-network providers directly, preventing advance payment by member.

Network

- Visit www.lablue.com/FindCare and select Blue Dental to find an Advantage Plus 2.0 Network provider.
- Online scheduling allows members to schedule appointments directly from the “Find a Doctor” webpage in real time. Just look for the blue “Schedule Online” button.
- Some providers accept allowances for certain non-covered services even when the member’s annual maximum has been met. Look for the green \$ave! button in our online directory.

ID Cards

- A combined ID card is issued for members with both medical and dental. An ID card is also issued if members have dental only.
- Members should show ID card with Advantage Plus 2.0 Network to dentist at time of service.
- The Customer Service phone number can be found on the back of the ID card.