



Air Group  
Dental Option Plan

**Horizon Dental wants you to get the most from your dental benefits.**

You can save money when you receive care from a dentist who participates in the Horizon BCBSNJ networks. When you use in-network dentists, you generally only pay your copayment and any applicable in-network coinsurance or deductible. If you use an out-of-network dentist, your out-of-network benefits apply and your out-of-pocket costs will likely be higher. If you do not have out-of-network benefits, you are responsible for the entire cost of treatment.

<b>BENEFIT PERIOD</b>		<b>Benefit Year</b>
<b>NETWORK</b>		Horizon PPO/Traditional + National Grid Plus
<b>DEDUCTIBLE</b>		
Individual		\$50
Family		\$150
Deductible Applies To		Treatment & Therapy, Endodontics, Periodontics, Oral Surgery, Prosthodontics, Crowns and Onlays
<b>BENEFIT PERIOD MAXIMUM</b>		\$1,500 (per person)
Benefit Period Maximum Applies To		Treatment & Therapy, Endodontics, Periodontics, Oral Surgery, Prosthodontics, Crowns and Onlays
<b>Orthodontics Eligibility</b>		Child      Lifetime
Orthodontics		50%
Orthodontics Maximum		\$1,500
<b>COINSURANCE</b>		
<b>Preventive Diagnostic</b>		
Exam and Preventive Services Exams		100%
Fluoride Treatment		100%
Sealant Application		100%
Adult Prophylaxis		100%
X-rays (Bitewing & Full Mouth)		100%
<b>Treatment and Therapy</b>		
Space Maintainers		80%
Amalgam Restorations		80%
Composite Restorations		80%
Denture Adjustments		80%
Denture Repairs		80%
Simple Extractions		80%
<b>Endodontics</b>		
Root Canal Therapy – Anterior & Bicuspid		80%
Root Canal Therapy – Molar		80%
<b>Periodontics</b>		
Scaling & Root Planing		80%
Gingivectomy		80%
Periodontal Maintenance		80%
Osseous Surgery		80%
<b>Oral Surgery</b>		
Surgical Extractions		80%
Partial Bony Extractions		80%
Complete Bony Extractions		80%
<b>Prosthodontics</b>		
Bridgework		50%
Partial Dentures		50%
<b>Crowns and Onlays</b>		
Crown – porcelain fused to high noble metal		50%
<b>Eligibility</b>		Dependent children of enrolled employees are covered to age 26

Horizon Blue Cross Blue Shield of New Jersey complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, gender, national origin, age, disability, pregnancy, gender identity, sex, sexual orientation or health status in the administration of the plan, including enrollment and benefit determinations.

Spanish (Español): Para recibir ayuda en español, llame al **1-800-4DENTAL (433-6825)**.  
Chinese: 如需中文協助, 請致電 **1-800-4DENTAL (433-6825)**

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