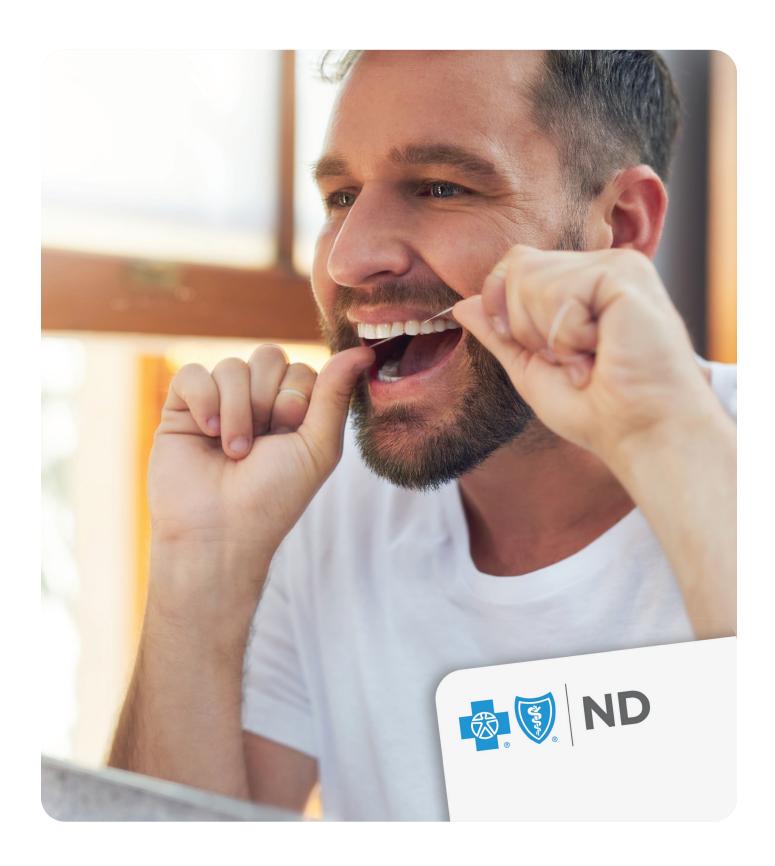
2026 BlueDentalSM Comparison

United Concordia Dental (UCD)



BlueDentalSM Plans

Comparison	BlueDental Elite³	BlueDental Premium	BlueDental Essential⁴	BlueDental Preferred	BlueDental Classic ⁶
Available to groups of 10 employees or more	⊗	⊗		⊗	⊗
Deductibles					
Member	\$50 \$50	\$50	\$50	D(P) \$50 D(NP) \$100	\$50
Family	\$100 \$100	\$100	\$100	D(P) \$100 D(NP) \$200	\$100
Annual Maximums					
Member	\$1,000 \$1,500	\$1,000	\$1,000	D(P) \$1,000 D(NP) \$1,000	\$1,000
Family	Ψ1,000 Ψ1,500	\$1,000	\$1,000	D(P) \$1,500 D(NP) \$1,500	\$1,000
Orthodontic Lifetime Maximums					
Member	Not covered				
Family	Noteovered				
Services					
Diagnostic					
Exam ¹	100%5	80%	100%5	D(P) 100% ⁵ D(NP) 80%	80%
Radiographs Bitewing X-rays					
Full Mouth/Panoramic X-rays Occlusal Films	100%5	80%	100%5	D(P) 100% ⁵ D(NP) 80%	80%
Preventive			1		
Cleanings (Prophylaxis) ¹	100%5		100%5	D(P) 100% ⁵ D(NP) 80%	
Fluoride ¹	10070	80%			80%
Sealants	80%		80%	D(P) 80% D(NP) 60%	F00/
Space Maintainers Restorative			50%	·	50%
Amalgam Restorations					
Fillings	80%	80%	80%	D(P) 80% D(NP) 60%	80%
Crowns and Repairs	50%	50%	50%	D(P) 60% D(NP) 50%	50%
Inlays, Onlays and Repairs	3070	3070	30%	D(F) 00% D(NF) 30%	3070
Endodontic			I		
Endodontic Therapy Root Canal Retreatment	80%	80%	50%	D(P) 80% D(NP) 60%	50%
Apicoectomy/Periradicular	0070	80%	30%	D(F) 80% D(NF) 60%	30%
Periodontal					
Surgical/Nonsurgical Periodontics	000/	0.00/	500/	D(D) 000/ D(ND) 600/	F.00/
Root Canal Retreatment	80%	80%	50%	D(P) 80% D(NP) 60%	50%
Prosthodontic			1	1	
Removable Complete/Partial Dentures	500/	500/	500/	D(D) 600(D(ND) 500(500/
Fixed Partial Dentures (Bridges) Adjustments/Repairs of Dentures	50%	50%	50%	D(P) 60% D(NP) 50%	50%
Implant			1		
Surgical Placement					
Supporting Structures	F00/	F00/	F.00/	D(P) 50% D(NP) 50%	F00/
Treatment of Implant Defects	50%	50%	50%		50%
Fixed Partial/Removable Denture				D(P) 60% D(NP) 50%	
Cone-Beam CT Images	100%5	80%	100%5	D(P) 100% ⁵ D(NP) 80%	80%5
Removal of Teeth	80%	80%	9006	D(D) 9004 D(ND) 6004	80%
Simple and Surgical Extractions Complex Oral Surgery	50%	50%	80% 50%	D(P) 80% D(NP) 60% D(P) 60% D(NP) 50%	50%
Adjunctive General	3070	3070	3070	2(1) 00 /0 2(141) 30 /0	3070
Consultations	900/		000/	D(D) 900/ D(ND) 600/	
General Anesthesia, Nitrous Oxide, IV Sedation		80%	80%	D(P) 80% D(NP) 60%	80%
Palliative Treatment (Emergency)	100%5		100%5	D(P) 100% ⁵ D(NP) 80%	
Orthodontic					
Orthodontic Services			Not co	vered	

BlueDental Elite+ ³	BlueDental Premium+	BlueDental Preferred+	BlueDental Classic+ ⁶	
⊗	⊗	⊗	⊗	
	<u>'</u>			
\$50 \$50 \$50 \$100 \$100 \$100	\$50 \$100	D(P) \$50 D(NP) \$100 D(P) \$100 D(NP) \$200	\$50 \$100	
\$1,000 \$1,500 \$2,000	\$1,000	D(P) \$1,000 D(NP) \$1,000 D(P) \$1,500 D(NP) \$1,500	\$1,000	
\$1,500 \$2,000 \$1,500	\$1,500	D(P) \$1,500 D(NP) \$1,500 D(P) \$2,000 D(NP) \$2,000	\$1,200	
100%5	80%	D(P) 100% ⁵ D(NP) 80%	80%	
100%5	80%	D(P) 100% ⁵ D(NP) 80%	80%	
100%5	80%	D(P) 100% ⁵ D(NP) 80%	80%	
80%	3070	D(P) 80% D(NP) 60%	50%	
80%	80%	D(P) 80% D(NP) 60%	80%	
50%	50%	D(P) 60% D(NP) 50%	50%	
80%	80%	D(P) 80% D(NP) 60%	50%	
80%	80%	D(P) 80% D(NP) 60%	50%	
50%	50%	D(P) 60% D(NP) 50%	50%	
			'	
50%	50%	D(P) 50% D(NP) 50%	50%	
4000/5	000/	D(P) 60% D(NP) 50%	000/5	
100%5	80%	D(P) 100% ⁵ D(NP) 80%	80%5	
80%	80%	D(P) 80% D(NP) 60%	80%	
50%	50%	D(P) 60% D(NP) 50%	50%	
80%	80%	D(P) 80% D(NP) 60%	80%	
100%5		D(P) 100% ⁵ D(NP) 80%		
50%⁵	50% ⁵	D(P) 50% ⁵ D(NP) 50%	50% ⁵	

Abbreviations and Definitions

D(P) = Participating Dentist D(NP) = Nonparticipating Dentist

Employer Contribution

To qualify for a group dental plan, the employer must contribute a minimum of 50% toward the individual contract premium payment.

Employer Participation

Coverage for dental programs is available only to groups of three employees or more.





¹Covered service does not apply to benefit maximums
²For groups 51+ with the \$50/\$100 deductible and the \$1,500 orthodontic lifetime maximum
³Multiple options available
⁴Only plan available for groups three to nine employees
⁵Deductible does not apply
⁶This plan is only available to self-funded clients

Protect your smile and budget with a plan built for you



Your BlueDental benefits include:



Broad access to dentists

Easy-to-find care close to home or while traveling



Lower, predictable costs

when you use in-network providers



Network

260 dentists across North Dakota

67,670 dentists across the country



100% coverage

Exams | X-rays | Cleanings



Serving

400 locations across North Dakota

250,813 locations across the country



No waiting periods

All services available from day one



Saving

You and your employees money when they visit a participating dentist



Up to four cleanings covered per year



Expanded procedure coverage

Preexisting missing teeth | Implants Orthodontic options | Crowns | Bridges



Find providers, virtual care options and care support programs using the Find Care tool located within BCBSND.me.

For further details of the coverage, including exclusions, any reductions or limitations and the terms under which the benefit plan may be continued, see your sales and account executive.

This is a brief explanation of covered services and payment levels of this product. It should not be used to determine whether dental expenses will be paid. The written certificate of insurance governs the benefits available.

United Concordia Companies, Inc. is an independent company providing dental benefit administrative services and access to a provider network for Blue Cross Blue Shield of North Dakota dental products.



Scan the QR code to view the non-discrimination notice or visit nd.blue/ non-discrimination-notice