



**CBA Blue**

**BluePrint<sup>sm</sup> – 2021 Dental Plan  
Options “Benefits at a Glance”**

Participants may seek services from a licensed provider of their choice  
Questions: Please call CBA Blue at 1.888.222.9206 or visit [www.cbabluevt.com](http://www.cbabluevt.com) .

**Premium Plan; Employee Only \$4.80,  
Employee+1 \$9.51, Family \$13.77**

**Quality Plan; Employee Only \$3.09,  
Employee+1 \$6.13, Family \$8.88**

**Plan Options**

**Premium Plan**

**Quality Plan**

Benefit	All Providers	All Providers
<b>Annual Deductible</b>	Single \$50 Family \$150	Single \$50 Family \$150
<b>Calendar Year Benefit Maximum</b> Per individual.	\$2000	\$750
<b>Lifetime Orthodontic Benefit Maximum</b> Maximum is per individual.	\$1500	Not Covered
<b>Preventative Services</b> Oral Exams Cleanings X-rays (Bitewing- 1 every six months, Full Mouth- 1 every 60 months) Sealants (up to age 19) Fluoride (up to age 19)	100%	100%
<b>Basic Restorative Services**</b> Periodontal Services Periodontal Cleanings Endodontic Services Root Canals Pulp Capping Sedative Fillings Composite Fillings Amalgam Fillings Crown Repairs Denture Adjustments Dental Reline Bridge Repairs Dental Anesthesia Simple Extractions Palliative Treatment	80%*	80%*
<b>Major Restorative Services</b> Inlay/Onlay Restoration Stainless Steel Crown Bridgework Crowns Dentures Partial Dentures Temporary Crowns Implants	50%*	Not Covered

\* Subject to Plan Deductible