



BlueCross BlueShield
of Texas

Pharr San Juan Alamo ISD Dental Summary

PSJA

BCBS CORE PLAN		
Covered Services	In-Network	Out-of-Network
Diagnostic Evaluations <i>(Deductible waived)</i>	80%	80%
Preventive Services <i>(Deductible waived)</i>	80%	80%
Diagnostic Radiographs <i>(Deductible waived)</i>	80%	80%
Miscellaneous Preventive Services <i>(Deductible waived)</i>	80%	80%
Basic Restorative Services	70%	70%
Non-Surgical Extractions	70%	70%
Non-Surgical Periodontal Services	50%	50%
Adjunctive Services	50%	50%
Endodontic Services	50%	50%
Oral Surgery Services	50%	50%
Surgical Periodontal Services	50%	50%
Major Restorative Services	50%	50%
Prosthodontic Services	50%	50%
Miscellaneous Restorative and Prosthodontic Services	50%	50%
Implants	Not Covered	Not Covered
Orthodontia <i>(Deductible waived)</i>	50%	50%
Limiting Age: 19		
Maximum Lifetime Benefits per individual for Orthodontia	\$1,000	\$1,000
Deductible <i>Three-Month Deductible Carryover applies</i>	\$75 individual / \$225 family	\$75 individual / \$225 family
Annual Maximum	\$1,000	\$1,000

BCBS BUY UP PLAN		
Covered Services	In-Network	Out-of-Network
Diagnostic Evaluations <i>(Deductible waived)</i>	80%	80%
Preventive Services <i>(Deductible waived)</i>	80%	80%
Diagnostic Radiographs <i>(Deductible waived)</i>	80%	80%
Miscellaneous Preventive Services <i>(Deductible waived)</i>	80%	80%
Basic Restorative Services	80%	80%
Non-Surgical Extractions	80%	80%
Non-Surgical Periodontal Services	80%	80%
Adjunctive Services	80%	80%
Endodontic Services	80%	80%
Oral Surgery Services	80%	80%
Surgical Periodontal Services	80%	80%
Major Restorative Services	50%	50%
Prosthodontic Services	50%	50%
Miscellaneous Restorative and Prosthodontic Services	50%	50%
Implants	50%	50%
Orthodontia <i>(Deductible waived)</i>	50%	50%
Limiting Age: 19		
Maximum Lifetime Benefits per individual for Orthodontia	\$1,500	\$1,500
Deductible <i>Three-Month Deductible Carryover applies</i>	\$75 individual / \$225 family	\$75 individual / \$225 family
Annual Maximum	\$1,500	\$1,500

Core Plan Rates		
Employee Only	\$	-
Family	\$	36.23
Working Couple Family	\$	20.20

Buy Up Plan Rates		
Employee Only	\$	4.65
Family	\$	51.46
Working Couple Family	\$	35.43