

Managed Dental Plans

Unmatched Product Suite



MetLife

The Coinsurance Option

The MET Series of Dental HMO/Managed Care Plans also offer a Coinsurance Plan that presents a member's out-of-pocket expenses for covered services as percentages. This may help employees compare coverage levels relative to DPPO plans.

The MET Series of Dental HMO/Managed Care¹ plans are designed to go beyond many traditional managed dental care plans to help you meet your benefit cost and employee retention goals, while addressing the oral health needs of your employees. These plans leverage the latest market trends, dental research and treatment protocols and do more to simplify the benefits, making it easier for employees and dental offices to understand what's covered.

In addition to a robust network of participating providers and the standard features of Dental HMO/Managed Care plans, the MET Series provides:

Less Hassle—no claims or claim forms, no deductibles, no calendar year maximums and an easy-to-understand schedule of benefits.

More than 400 covered procedures²—includes co-pays for services such as implants, veneers, white fillings, IV sedation, general anesthesia and nitrous oxide.

25% fee reduction off of a participating dentist's customary fee for non-listed procedures³—offering opportunities for additional out-of-pocket savings⁴ (not available in CA and TX).

Expanded preventive and diagnostic benefits—providing co-pays for procedures such as brush biopsies and additional cleanings when appropriate.

Defined fees for materials and procedures requiring multiple services (e.g., root canals, crowns and bridges)—minimizing fee confusion.

Benefiting orthodontic treatment in progress at initial group enrollment—making transition of care easier.⁵

Discount Vision—Employees and their entire family can receive substantial discounts—as often as they need—on eye exams, glasses, frames, lenses, lens options and laser vision correction.^{6,7}

FOR MORE INFORMATION, CONTACT YOUR METLIFE SALES REPRESENTATIVE TODAY.

continued >

COVERAGE HIGHLIGHTS

Highlights of the MET Series of Dental HMO/Managed Care Plans (Copay Options)

MEMBER CO-PAYMENT

OFFERED IN THE FOLLOWING STATES:

	MET 50	MET 85	MET 100	MET 150A	MET 185	MET 185A	MET 225	MET 245	MET 290	MET 335
	CA, NJ & NY	CA, NJ & NY	CA, NJ & NY	CA, NJ & NY	CA, FL, NJ, NY & TX	CA, FL, NJ & NY	CA, FL, NJ, NY & TX	CA, FL, NJ, NY & TX	CA, FL, NJ, NY & TX	CA, FL, NJ, NY & TX
D0120 Periodic oral evaluation – established patient	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
D0210 Intraoral – complete series (including bitewings)	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
D0330 Panoramic film	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
D1110 Prophylaxis – adult	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$5	\$5
D1120 Prophylaxis – child	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$5	\$5
D1351 Sealant – per tooth	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
D2140 Amalgam – one surface, primary or permanent	\$0	\$0	\$0	\$0	\$10	\$0	\$0	\$0	\$12	\$12
D2330 Resin-based composite – one surface, anterior	\$0	\$0	\$0	\$0	\$10	\$0	\$0	\$0	\$12	\$12
D2391 Resin-based composite – one surface, posterior	\$25	\$25	\$25	\$25	\$30	\$30	\$30	\$30	\$30	\$30
D2750 Crown – porcelain fused to high noble metal ⁸	\$50	\$85	\$100	\$150	\$185	\$185	\$225	\$245	\$290	\$335
D2960 Labial veneer (resin laminate) – chairside	\$250	\$250	\$250	\$250	\$250	\$250	\$250	\$250	\$250	\$250
D3330 Endodontic Therapy, ⁹ molar (excluding final restoration)	\$75	\$95	\$95	\$125	\$200	\$200	\$210	\$210	\$265	\$305
D4260 Osseous surgery (including flap entry and closure) – four or more contiguous teeth or bounded teeth spaces per quadrant	\$160	\$160	\$260	\$260	\$295	\$295	\$295	\$300	\$330	\$330
D4341 Periodontal scaling and root planing – four or more teeth per quadrant	\$15	\$15	\$25	\$35	\$40	\$40	\$40	\$50	\$50	\$60
D4910 Periodontal maintenance	\$15	\$15	\$15	\$30	\$30	\$30	\$30	\$40	\$40	\$45
D5110 Complete denture – maxillary	\$100	\$100	\$125	\$175	\$210	\$210	\$260	\$325	\$440	\$505
D5211 Maxillary partial denture – resin base (including any conventional clasps, rests and teeth)	\$100	\$100	\$110	\$150	\$240	\$240	\$240	\$400	\$405	\$405
D6010 – Surgical placement of implant body: endosteal implant	\$1,005	\$1,005	\$1,005	\$1,005	\$1,005	\$1,005	\$1,005	\$1,005	\$1,005	\$1,005
D6054 – Implant/abutment supported removable denture for partially edentulous arch	\$945	\$945	\$945	\$945	\$945	\$945	\$945	\$945	\$945	\$945
D6059 – Abutment supported porcelain fused to metal crown (high noble metal)	\$660	\$660	\$660	\$660	\$660	\$660	\$660	\$660	\$660	\$660
D7140 Extraction, erupted tooth or exposed root (elevation and/or forceps removal)	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$5	\$5	\$5
D7220 Removal of impacted tooth – soft tissue	\$10	\$10	\$20	\$35	\$45	\$45	\$45	\$50	\$50	\$60
D7288 Brush biopsy – transepithelial sample collection	\$50	\$50	\$50	\$50	\$50	\$50	\$50	\$50	\$50	\$50
D8080 Comprehensive orthodontic treatment of adolescent dentition	\$1,450	\$1,450	\$1,450	\$1,695	\$1,695	\$1,695	\$1,695	\$1,850	\$2,095	\$2,410
D8090 Comprehensive orthodontic treatment of adult dentition	\$1,450	\$1,450	\$1,450	\$1,695	\$1,695	\$1,695	\$1,695	\$1,850	\$2,095	\$2,410
D9220 Deep sedation/general anesthesia – first 30 minutes	\$150	\$150	\$150	\$150	\$150	\$150	\$150	\$150	\$150	\$150
D9230 Inhalation of nitrous oxide/analgesia, anxiolysis	\$15	\$15	\$15	\$15	\$15	\$15	\$15	\$15	\$15	\$15
D9241 Intravenous conscious sedation/analgesia – first 30 minutes	\$150	\$150	\$150	\$150	\$150	\$150	\$150	\$150	\$150	\$150

Availability of products and features are based on MetLife's guidelines, group size, underwriting and state requirements.

Like most group benefit programs, benefit programs offered by MetLife and its affiliates contain certain exclusions, exceptions, waiting periods, reductions of benefits, limitations and terms for keeping them in force. Please contact MetLife for complete details.

Dental Managed Care plan benefits are provided by Metropolitan Life Insurance Company, a New York corporation, in NY. Dental HMO plan benefits are provided by: SafeGuard Health Plans, Inc. a California corporation, in CA; SafeGuard Health Plans, Inc. a Florida corporation, in FL; SafeGuard Health Plans, Inc., a Texas corporation, in TX; and MetLife Health Plans, Inc., a Delaware corporation, and Metropolitan Life Insurance Company, a New York corporation, in NJ. The Dental HMO/Managed Care companies are part of the MetLife family of companies.

- "DHMO" is used to refer to product designs that may differ by state of residence of the enrollee, including but not limited to: "Specialized Health Care Service Plans" in California; "Prepaid Limited Health Service Organizations" as described in Chapter 636 of the Florida statutes in Florida; "Single Service Health Maintenance Organizations" in Texas; and "Dental Plan Organizations" as described in the Dental Plan Organization Act in New Jersey.
- Co-payments apply for many covered procedures and vary by procedure.

- Members are responsible for the participating dentist's full fee for procedures specifically excluded from coverage.
- Negotiated fees for non-listed services do not apply in all states. Please contact MetLife for more details.
- Continuing orthodontic treatment applies to groups with 2 or more eligible lives.
- Custom LASIK coverage only available using wavefront technology with the microkeratome surgical device. Other LASIK procedures may be performed at an additional cost to the member. Laser vision care discounts are only available from in-network contracted facilities.
- MetLife VisionAccess is a discount program and not an insured benefit. The program is available at no charge regardless of enrollment in other MetLife benefits as long as the plan sponsor has an active MetLife group product. It is provided through Vision Service Plan (VSP), Rancho Cordova, CA. VSP is not affiliated with Metropolitan Life Insurance Company or its affiliates.
- There is a maximum charge of \$150 in addition to the listed co-payment if noble, high noble or titanium metal is used. There is an additional charge of \$75 for porcelain on molars.
- Root canal.

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