



Ozark School District
Dental Plan Comparison Effective 7-1-2024



Carrier	MetLife	
Plan Name	MetLife Dental	
Network	MetLife PDP Plus Network	
	Network	Non-Network
Deductible		
Individual	\$50	\$50
Family	\$150	\$150
Co-Insurance		
Preventive	100%	100%
Basic	90%	80%
Major	60%	50%
Endodontics	90%	80%
Periodontics	90%	80%
Oral Surgery	60%	50%
Orthodontic	50%	50%
Benefit Maximums		
Dental - Annual	\$1,000	
Orthodontic - Lifetime	\$1,000	
Non-Network Percentile	90th UCR	
	Cost Per Pay Period (20 Pay)	Cost Per Pay Period (24 Pay)
Employee	\$22.18	\$18.49
Employee plus One	\$44.88	\$37.40
Employee plus Two or More	\$75.41	\$62.84

This is only an illustrative description of benefits prepared by BPJ. Please consult the plan documents for specific coverages.