

Why is having a good dental plan so important?

Having dental coverage makes it easier to visit the dentist and help lower your costs.¹



Two valuable plan options to choose from:

Dental PPO

- Little to no out-of-pocket costs for cleanings, X-rays, and exams in-network.²
- Flexibility to choose any licensed dentist, in or out of the network.
- Average savings up to 35-50% on dentist list prices for everything from fillings to crowns.³
- In-network discounts on covered services apply even after you have reached your plan's annual maximum.

Dental HMO/Managed Care

- Significantly lower costs than average dental charges
- Access to a large network of carefully screened dentists.⁴
- Over 400 covered procedures, such as cleanings, crowns, extractions, orthodontics, root canals, and X-rays.
- At time of enrollment, pre-select a dentist who participates in the network.
- No waiting periods, claims forms, deductibles, or annual maximums.

Now that you know the benefits of having dental coverage, learn more and enroll today!

Features	Preferred Dentist Program PPO	Dental HMO/Managed Care Plan
Eligibility	Available to individuals and their family members nationwide.	Available to residents of CA, FL, NJ, NY, and TX.
Choice of Dentists	Flexibility to choose any dentist, in or out of network.	Pre-select a dentist during enrollment who is in the network. Each family member may select a different participating dentist.
Specialty Care	No referral needed for specialty care.	Your dentist will determine if you need services of a specialty care provider. ⁵
Network Discounts	Participating dentists have agreed to MetLife's negotiated fees, with savings up to 35%-50% on dentist list prices. ³	Access to hundreds of dental services at discounted costs. ¹

1. Savings from enrolling in a dental benefits plan will depend on various factors, including the cost of the plan, how often participants visit the dentist, and the cost of services rendered.

2. Preventive services are subject to frequency limitations. Please see your certificate for more details.

3. Based on MetLife data. Negotiated fees refer to the fees that participating dentists have agreed to accept as payment in full for covered services rendered by them, subject to any copayments, deductibles, cost sharing, and benefits maximums. Negotiated fees are subject to change.

4. Certain providers may participate with MetLife through an agreement that MetLife has with a vendor. Providers available through a vendor are subject to the vendor's credentialing process and requirements, not MetLife's. If you should have any questions, contact MetLife Customer Service.

5. In California, orthodontic and periodontic specialty services requires pre-approval. Your selected participating dentist will contact SafeGuard (a MetLife company) for pre-approval. Once approved, your dentist will contact you with the name of a participating specialist.

Like most group benefit programs, benefit programs offered by MetLife and its affiliates contain certain exclusions, exceptions, waiting periods, reductions, limitations, and terms for keeping them in force. Please contact MetLife or your plan administrator 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.