MetLife Dental PDP Plans -Standard and Basic

MetLife Dental Insurance	Standard Dental Plan	Basic Dental Plan
PLAN FEATURES		
Plan Year Maximum Not applicable to Orthodontia.	\$1,500	\$1,000
Plan Year Deductible	\$50 per person \$150 per family	None
Deductible Carryover	None	None
COVERED SERVICES	In Network Benefits*	
Preventive Services Initial/Routine Oral Exam, Teeth Cleaning & Routine Scaling, Fluoride Treatment, Sealant (children under 17), X-rays as part of a general exam, Emergency Exam	100% no deductible	50%
General Services Fillings, Extractions, General Anesthetics, Space Maintainers, Oral Surgery, Periodontics, Endodontics	80% after deductible	50%
Major Services Inlays/Onlays, All other Crowns, Dentures, Bridges, Implants	50% after deductible	50%
Orthodontia – Adult and Child* Orthodontic Diagnostics, Orthodontic Treatment.	50%	Not Covered under this plan
Orthodontic lifetime maximum*	\$1,500	No Coverage

Certificate of Insurance – A copy of the Certificate of Insurance is available from the Lewisville ISD Benefits Office.

Master Policy – A copy of the Master Policy is available from the Lewisville ISD Benefits Office.

MetLife Dental Customer Service 1-800-942-0854

*Your Costs for Out of Network Providers: Payment to out of network providers from MetLife is based on a maximum allowable amount. The maximum allowable amount is the amount that will be allowed by MetLife for a covered procedure. If you receive treatment from an out of network provider you will be responsible for any monies owed in excess of the maximum allowable amount.

Pre-Treatment Estimates – With Pre-treatment estimates, you never have to wonder what your out-of-pocket expense will be. MetLife recommends that you request a pre-treatment estimate for services in excess of \$300 (This often applies to services such as crowns, bridges, inlays, and periodontics.) To receive a benefit estimate, simply have your dentist submit a request for pre-treatment estimate online at www.metdental.com or call 1-877-MET-DDS (638-3379). You and your dentist will receive a benefit estimate (online or by fax) for most procedures while you're still in the office, so you can discuss treatment and payment options, and have the procedure scheduled on the spot. Actual payments may vary depending upon plan maximums, deductibles, frequency limits and other conditions at time of payment.

How Do I Find a participating PDP Dentist? There are nearly 115,000 participating PDP dentist locations nationwide, including over 27,000 specialist locations. You can get a list of these participating PDP dentists online at www.metlife.com/mybenefits or call 1-800-942-0854 to have a list faxed or mailed to you.

How are claims processed? Dentist may submit your claims for you which mean you have little or no paperwork. You can track your claims online and even receive e-mail alerts when a claim has been processed. If you need a claim form, you can find one online at www.metlife.com or request one by calling 1-800-942-0854.

What services are covered by my plan? All services defined under your group dental benefits plan are covered.

Limitations

2 per plan year		
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12 consecutive months, for dependent child to age 14		
Limitation of one application of sealant material for each non-restored permanent 1^{st} and 2^{nd} molar tooth of a dependent child to age 17, once every 36 months		
For relief of pain only		
Once per 36 months		
Once every 5 years		
For oral surgery and Periodontics only		
Once every 5 years		
Once every 5 years		