Dental Benefits

Product Overview

MetLife



You're more likely to visit the dentist when you have dental coverage.

Why is having a good Dental plan so important?

Because a healthier smile can be important to maintaining overall health.

Maintaining good oral health matters. Studies show that those with dental coverage are more likely to visit the dentist.¹ And of course staying on top of your care is the key to preventing costly problems that can add up. Plus, going to the dentist regularly can help prevent problems that have been linked to stroke or heart disease.²

That's where a good dental plan comes in. The right coverage makes it easier to visit the dentist and helps lower your costs. You get support to keep up with dental cleanings and other preventive care that helps you avoid costly problems and live healthier. Now that's something to smile about.

Because keeping your teeth healthy, without a dental plan, can be expensive.

While costs will vary based on where you live, the average family of four spends **\$1,824** a year on dental services, not including the cost of braces.³ Meanwhile, the average cost for dental coverage is **\$596**.⁴ For less than half of the cost, you get protection against unexpected care and low to no costs for preventive care.

See how much you could save⁶ in a single year when visiting a participating dentist.

Keep in mind this is only an illustration. Your costs and savings⁶ could vary based on your plan design, where you live, and whether your plan requires a co-payment or co-insurance. Please see your Plan Summary for details about your specific coverage.^{5,6}

Service	Dentist's usual fee	Negotiated fee	Percent covered	MetLife pays	Your cost	You Save [€]
Exam	\$90	\$54	100%	\$54	\$0	\$90
X-rays	\$121	\$74	100%	\$74	\$0	\$121
Filling	\$138	\$76	80%	\$60.80	\$15.20	\$122.80
Root Canal	\$1,027	\$737	80%	\$589.60	\$147.40	\$879.60
Crown	\$1,067	\$681	50%	\$340.50	\$340.50	\$726.50

continued >

Why should I enroll now?

✓ Help protect your smile and your wallet. You and your family can get the dental care you need in the coming year, and save money too.⁶

Enroll today!

How can this Dental plan benefit you?

By making it easier to get the care you need and lower your out-ofpocket costs.

Freedom of choice

MetLife's Preferred Dentist Program is a Dental PPO plan. So you can visit any licensed dentist, in or out of network, and receive benefits.

- If you prefer to go to a participating dentist, you can count on our large and constantly growing network. Plus, all participating dentists must meet rigorous selection standards.⁷ So you know you are in good hands.
- Find a participating dentist today at <u>www.metlife.com/dental</u>.

Lower costs

- \circ Take advantage of negotiated fees that are typically 15 45% less than the average charges in the same area. 8
- Participating dentists accept these fees as payment in full for covered services.

Less worry, less paperwork and more service

- Easy access to pre-treatment estimates,⁹ real-time claims processing and 24-hour customer service by phone, fax or online.
- Educational tools and resources help you and your dentist make more informed decisions.

For added convenience, MetLife's mobile application¹⁰ is now available on the iTunes[®] App Store and Google Play. After downloading this app,¹¹ you can use it to find a participating dentist, view your claims and to see your ID Card.

- ³ National Average; Source: Bureau of Economic Analysis, 2012. This statistic does not include amounts paid for insurance premium.
- ⁴ National Association of Dental Plans; What do dental benefits cost on a group basis or if I buy them directly as an individual?; http://www.nadp.org/Dental_Benefits_Basics/Dental_BB_7.aspx, accessed May 2015.
- ⁵ These hypothetical In-network savings examples are based on average charges in the Philadelphia area, for procedure codes D1110, D0277, D2150, D3330 and D2740.
- ⁶ Savings from enrolling in a dental benefits plan will depend on various factors, including plan design and premiums, how often participants visit the dentist and the cost of services rendered.
- ⁷ 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.
- ⁸ Based on internal analysis by MetLife. Negotiated Fees refers to the fees that in-network dentists have agreed to accept as payment in full for covered services, subject to any co-payments, deductibles, cost sharing and benefits maximums. Negotiated fees are subject to change.
- ⁹ A pre-treatment estimate is only an estimate. The actual amount that MetLife will pay is determined when a claim is submitted, and is subject to any co-payments, deductibles, cost sharing and benefits maximums.
- ¹⁰ The features of the MetLife Dental Mobile App are not available for all MetLife Dental Plans
- ¹¹ Before using the MetLife Dental Mobile App, you must register at wwwmetlife.com/mybenefits from a computer. Registration cannot be done from your mobile device.

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



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¹ 2013 US Survey of Dental Care Affordability and Accessibility; Empirica Research; July 2013.

² American Dental Association; Dentists: Doctors of Oral Health. Accessed May 2015, <u>www.ada.org/en/about-the-ada/dentists-doctors-of-oral-health</u>.