Group Insurance Benefits



Dental Insurance

Preferred Dentist Program (PPO)





What is Dental Insurance

Reduce your out-of-pocket costs for dental check-ups and procedures

Key Features

- Little to no out-of-pocket costs for cleanings, X-rays, and exams in-network.^{D1}
- Average savings of 35-50% on dentist list prices.^{D2}
- Your dentist usually handles claims which means less paperwork for you

Understand the types of procedures

Different plans pay different percentages for these procedures.

- Preventive Care cleanings, X-rays and exams
- Basic Care fillings and extractions
- Major Care bridges, crowns and dentures
- Orthodontic Care child/(ren)





Why are dental benefits so important?

High cost of certain dental treatments

Benefit of preventive care

Connection between **oral health** and **overall health**

A plan that offers savings, choice and anywhere, anytime service¹



Negotiated fees typically 35% to 50%less than the average charges in the same area^{D2}



Explore our large network of carefully selected, participating dentists with flexibility to go to any dentist **in- or out-of-network**



With MetLife's International Dental Travel Assistance Program, access dentists in more than 200 countries^{D3}



Easy access to pre-treatment estimates, real-time claims processing and 24-hour customer service



MetLife Dental Plans

Compare the benefits under the Low- and High-Option plans

Services	Low-Option Benefit In-network: ^{D4} % of Negotiated fee ^{D5} Out-of-network: ^{D4} 90% of R&C fee ^{D6} Scheduled Amount ^{D7}	High-Option Benefit In-network: ^{D4} % of Negotiated fee ^{D5} Out-of-network: ^{D4} 90% of R&C fee ^{D6} Scheduled Amount ^{D7}
Preventive & Diagnostic Services	In-Network: 100% / Out-of-Network: 100%	In-Network: 100% / Out-of-Network: 100%
Basic Restorative Services	In-Network: 80% / Out-of-Network: 80%	In-Network: 80% / Out-of-Network: 80%
Major Restorative Services	In-Network: 0% / Out-of-Network: 0%	In-Network: 50% / Out-of-Network: 50%
Child Orthodontia Covered Services ⁸	Orthodontia not covered	In-Network: 50% / Out-of-Network: 50%
Calendar-Year Deductible – Applies to Basic and Major Restorative Services: Individual vs Family	\$50 Individual \$150 Family	\$50 Individual \$150 Family
Waiting Period	None	None
Calendar-Year Maximum Benefit	\$750/person	\$2,000/person
Child Orthodontia Lifetime Maximum	Orthodontia not covered	\$1,000/person



Find a Dental Provider

With MetLife Dental insurance, you can choose from thousands of general dentists and specialists nationwide. You can find the names, addresses, languages spoken and phone numbers of participating dentists by searching our online **Find a Dentist** directory.



Step 1:
Go to metlife.com

Enter your Zip, City or State and select the "Find a Dentist" button. You will then be prompted to select your plan from the list. The plan name is located in your Schedule of Benefits.



Step 2:

Select "Find a Dentist" next to "How can we help you?"



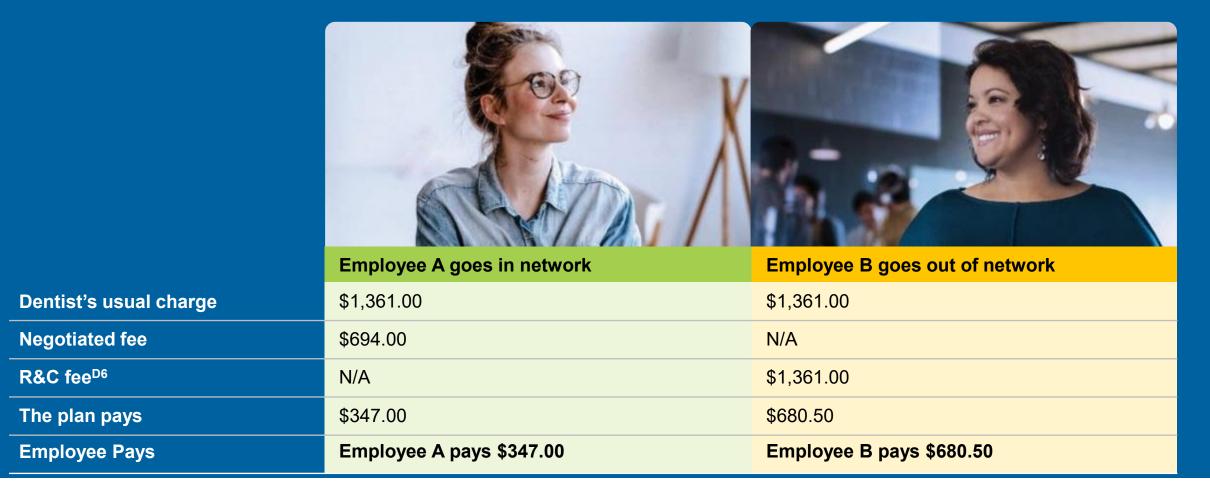


Step 3: Select "PDP Plus" next to "Choose your network."





If I Need A Crown...



Helping you make smarter choices



Vision Insurance



Davis Vision by MetLife...savings, choice and convenience

Discover a plan that may help you save on vision services,^{v4} including eye exams, glasses and contact lenses

 You can even get a discount on laser vision correction^{V1} and hearing exams^{V5}

Access to thousands of eye care professionals and popular retailers like Costco[®] Optical, Walmart Vision, Sam's Club Optical and more

Choose the eyewear style you want

- Take advantage of a selection of fully covered frames at no cost to you, plus coverage on designer frames for \$40 or less
- Shop online in-network eyewear stores, including Glasses.com,
 1-800-contacts, Befitting.com and Visionworks.com

Out-of-network coverage





Superior Vision by MetLife...savings, choice and convenience

In-network benefits for a wide range of covered services, V4 including eye exams, glasses and contact lenses

- Discounts on lens enhancement options^{V6} and laser vision correction^{V1}
- Free hearing exam and a discount of 40% off the national average for hearing aids^{V5}

Option to see any licensed ophthalmologists, optometrists and opticians at participating retail and private practice locations^{V7}

- The top 50 retailers in-network, including America's Best Contacts & Eyeglasses, Costco Optical, Eyeglass World, LensCrafters, Pearle Vision, Target Optical, VisionWorks, Walmart and more^{V15}
- Popular online in-network eyewear stores, including Glasses.com, ContactsDirect, 1-800-contacts and Befitting



Out-of-network coverage



Vision Plans – Benefits Comparison

Benefit Type	Davis Plan In-Network Coverage	Superior Plan In-Network Coverage	Frequency
Eye exam	Covered in full after a \$10 copay Retinal imaging: up to \$39 copay	Covered in full - \$10 copay Retinal imaging: up to \$39 copay	Once every 12 months
Materials/EyewearLenses for glasses or contactsFrames	\$25 copay	\$10 copay	Once every 12 months
Frame Allowance 20% off any amount over frame allowance at in-network private practice providers V6	Covered up to \$130 allowance after eyewear copay	*Covered up to \$200 allowance Additional \$25 allowance at select providers. ^{V7}	Once every 24 months *Once every 12 months
Standard Corrective Lenses	Covered after \$25 copay Standard Polycarbonate covered in full for child(ren) up to age 18	Covered after \$10 copay Standard Polycarbonate covered in full for child(ren) up to age 18	Once every 12 months
Contact Lenses Fitting and Evaluation Elective Lenses Necessary	Standard and Premium fit: 15% discount Elective: Covered up to \$130 allowance Necessary: Covered in full	Standard fit: Covered in full after a \$25 copay Specialty fit: \$50 allowance after a \$25 copay Elective: Covered up to \$130 allowance Necessary: Covered in full	Once every 12 months

Vision Plan – Additional Benefits

Benefit Type	Davis Plan	Superior Plan	
Additional Lens Enhancements	 Designated options available with a "not to exceed" pricing/ maximum member out of pocket amount. Average 20-25% savings on all lens enhancements not otherwise covered. 	Average 20-25% savings on all other lens enhancements.	
Additional Discounts on Glasses and Sunglasses	 50% off additional pairs of eyeglasses and sunglasses at Visionworks and 30% off at other participating providers on the same transaction. Otherwise, 20% off the provider's usual and customary rate may be available. 	 20% savings on additional pairs of prescription glasses and nonprescription sunglasses, including lens enhancements. 	
Additional Savings on Contacts	 15% off any amount over your contact lens allowance. 15% discount on additional contacts. 	 10% off any amount over your disposable contact lens allowance or 20% off any amount over your conventional contact lens allowance. 10% - 20% discount on additional contacts. 	
Laser Vision Correction	 Savings of 20% - 35% off the national average price of traditional LASIK are available at over 1,000 locations across our nationwide network of laser vision correction providers. 		
Hearing Discounts	 Savings of up to 40% off national average selling prices for brand name hearing aids. A National Hearing Network of hearing care professionals, featuring Your Hearing Network, offers Davis Vision members discounts on services, hearing aids and accessories. These discounts should be verified prior to service. 		

Davis Plan Breakage Warranty: All eyeglasses come with a breakage warranty for repair or replacement of the frame and/or lenses for a period of one year from the date of delivery. The one-year breakage warranty applies to all plan-covered eyeglasses (i.e., all spectacle lenses, Davis Vision Exclusive Collection frames and national retailer frames, where our Exclusive Collection is not displayed). Warranty does not apply to Glasses.com.

Find a Vision Provider

With MetLife Vision insurance, you can choose from thousands of private practice optometrists and ophthalmologists nationwide, as well as many large retail chain stores. You can find the names, addresses, languages spoken and phone numbers of participating vision providers by searching our online Find a **Vision Provider** directory.



Step 1:
Go to metlife.com

Enter your Zip, City or State and select the "Find a Find A Vision Provider" button. You will then be prompted to select your plan from the list. The plan name is located in your Schedule of Benefits.



Step 2:

Select "Find a Vision Provider" next to "How can we help you?"





Step 3: Choose your network provider.

Choose your network provider

• Davis Vision > • Superior Vision > • VisionAccess > • VisionAccess > • Federal Vision Plan (FEDVIP) >



Questions? Need help or more info.?



Register with MyBenefits today!

www.metlife.com/mybenefits



Call:

1-800-GET-MET8 (1-800-438-6388)

Mondays - Fridays, 8 a.m. – 9 p.m., ET Saturdays - Sundays, 10 a.m. – 7 p.m., ET



Thank you.





- D1. Subject to frequency limitations.
- D2. Negotiated fees refer to the fees that in-network dentists have agreed to accept as payment in full for covered services, subject to any deductibles, copayments, cost sharing and benefit maximums. Negotiated fees are subject to change.
- D3. AXA Assistance USA, Inc. provides dental referral services only. AXA Assistance is not affiliated with MetLife, and the services and benefits they provide are separate and apart from the insurance or services provided by MetLife. Referral services are not available in all locations.
- D4. In-network refers to benefits provided under this program for covered dental services that are provided by a participating dentist. Out-of-network refers to benefits provided under this program forcovered dental services that are not provided by a participating dentist.
- D5. 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
- D6. R&C fee refers to the Reasonable and Customary (R&C) charge, which is based on the lowest of (1) the dentist's actual charge, (2) the dentist's usual charge for the same or similar services, or (3)the charge of most dentists in the same geographic area for the same or similar services as determined by MetLife.
- D7. Payment for out-of-network services is based on the lesser of the dentist's actual fee or the Maximum Allowable Charge (MAC). The out-of-network Maximum Allowable Charge is a scheduled amount determined by MetLife.
- D8. We recommend you receive a pre-treatment estimate from your provider to determine estimated costs of your orthodontia treatment. Note: Lifetime Maximum for Orthodontia treatment is \$2,000 in-network or out-of-network. Child orthodontia is covered under the High Option benefit only. Orthodontia covers children up to their 19th birthday. Adult orthodontia is not covered under any program option.
- D9. 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.
- D10. Please see plan details for out-of-network benefits.



D11 Certain Limitations apply to some services; please review your Schedule of Benefits for full details.

D12 In California, orthodontic and pedodontic specialty services require pre-approval. Your selected participating dentist will contact SafeGuard for pre-approval. Once approved, your dentist will contact you with the name of a participating specialist.

D13 May be subject to any plan cost sharing such as benefits maximums.

D14 SG-D plans specialty care is available at 75% of the provider's usual and customary fee

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. You may be financially responsible for copayments, deductibles, or any other amounts in excess of those MetLife is required to pay for covered services as described in your dental certificate and/or policy.

Use if PPO/PDP

Group dental insurance policies featuring the Preferred Dentist Program are underwritten by Metropolitan Life Insurance Company, New York, NY 10166.



- V1. Laser vision correction services administered by QualSight, LLC.
- V2. Comparison is based on national averages and most commonly purchased brands.
- V3. Based on employee-only rate for a M130-10/25 standard plan design with employees nationwide. Premiums may vary.
- V4. Actual costs and benefits may vary based upon plan design selected. Exclusions and Limitations may apply.
- V5. Hearing services administered by Your Hearing Network.
- V6. Not all providers participate in vision program discounts, including the member out-of-pocket features. Members are urged to contact their provider prior to scheduling an appointment to confirm if the discount and member out-of-pocket features are offered at that location. Discounts and member out-of-pocket are not insurance and subject to change without notice.
- V7. Please see Superior Vision by MetLife's provider directory for a full list of participating providers.

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Product Disclaimers: Dental

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Use if PPO/PDP

Group dental insurance policies featuring the Preferred Dentist Program are underwritten by Metropolitan Life Insurance Company, New York, NY 10166.

Use if Managed Care/DHMO

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.



Product Disclaimers: Vision

Use for VSP Choice: Benefits are underwritten by Metropolitan Life Insurance Company (MetLife), New York, NY. Certain claim and network administration services are provided through Vision Service Plan, Rancho Cordova, CA (VSP). VSP is not affiliated with MetLife or its affiliates. Like most group benefit programs, benefit programs offered by MetLife and its affiliates contain certain exclusions, exceptions, reductions, limitations, waiting periods, and terms for keeping them in force. Please contact MetLife or your plan administrator for costs and complete details.

Use for Davis Vision: MetLife Vision benefits are underwritten by Metropolitan Life Insurance Company, New York, NY. Certain claims and network administration services are provided through Davis Vision, Inc. ("Davis Vision"), a New York corporation. Davis Vision is part of the MetLife family of companies. Like most group benefit programs, benefit programs offered by MetLife and its affiliates contain certain exclusions, exceptions, reductions, limitations, waiting periods and terms for keeping them in force. Please contact MetLife or your plan administrator for costs and complete details.

Use for Superior Vision: MetLife Vision benefits are underwritten by Metropolitan Life Insurance Company, New York, NY. Certain claims and network administration services are provided through Superior Vision Services, Inc. ("Superior Vision"), a Delaware corporation. Superior Vision is part of the MetLife family of companies. Like most group benefit programs, benefit programs offered by MetLife and its affiliates contain exclusions, exceptions, reductions, limitations, waiting periods and terms for keeping them in force. Please contact MetLife or your plan administrator for costs and complete details.

