

FAQs

Frequently Asked Questions



MetLife Dental Insurance

Why is having a good dental plan so important? Because keeping your teeth healthy can be an important step in maintaining overall health. And because keeping up with your dental cleanings and other preventive care now can help you avoid expensive dental problems and costly treatments later on.

Q. Who is eligible for this dental insurance plan?

A. Members, their spouse/domestic partners and dependent children¹ may apply.

Q. How many plans are available?

A. MetLife offers two dental plans — a High Plan and a Low Plan. Coverage, deductibles and maximums may vary based on the plan selected.²

Q. How do I find a participating dentist?

A. There are thousands of general dentists and specialists to choose from nationwide — so you are sure to find one who meets your needs. You can receive a list of these participating dentists online at www.metlife.com. Enter your ZIP code and select the PDP Plus network.

Q. Can I see my current dentist?

A. Yes, absolutely. Chances are your dentist participates in the MetLife network. But if not, you are always free to select any general dentist or specialist. However your out-of-pocket expenses may be greater if you visit a dentist who does not participate in the network.

Q. What types of services does the plan cover?

A. Dental procedures covered include: exams and cleanings, X-rays, fillings, root canals and much more.² See the plan summary for more information, including exclusions, co-pays, deductibles and limitations.

Q. How can the plan save me money?

A. While costs will vary based on where you live, the average family of four spends \$1,824 a year on dental services.³ With a dental plan, you get protection to help cover costs for unexpected dental care with low to no costs for preventive care.⁴

Q. Can I get an estimate of my out-of-pocket expenses?

A. Yes. We recommend that you request a pre-treatment estimate for services totaling more than \$300. Ask your dentist to submit a request online at www.metdental.com or call 1-877-MET-DDS9. You and your dentist will receive an estimate for most procedures while you're still in the office — however actual payments may vary depending on plan maximums, deductibles, frequency limits or other conditions.

Q. How are claims processed?

A. Dentists may submit your claims for you, which means you have little or no paperwork.

Q. Do I need an ID card?

A. No. You do not need an ID card to access your benefits.

Q. How long can my coverage continue?

A. Your coverage can continue as long as you pay your premium when due, remain a member, remain in an eligible class, the insurance continues for your class, the participating association continues to participate in the trust and the policy remains in force. Please see the certificate of insurance for details.

Don't miss out on this important benefit offer.

If you have any questions, please call Insurance Specialists, Inc. at **1-888-474-1959**.

¹Refers to your unmarried, dependent children under the age of 26.

²Those services set forth under your dental benefits summary are covered. Please review your certificate of insurance for a more detailed list of covered services.

³Statistic Brain Research Institute, Consumer Spending Statistics, October 2015. <http://www.statisticbrain.com/what-consumers-spend-each-month>. Accessed February 14, 2017.

⁴Savings from enrolling in the MetLife Dental Plan will depend on various factors, including how often participants visit the dentist and the costs for services rendered.

Coverage may not be available in all states. Please contact Insurance Specialists, Inc. at 1-888-474-1959 for additional details.

Like most insurance policies, insurance policies offered by MetLife and its affiliates contain certain exclusions, exceptions, reductions, limitations, waiting periods and terms for keeping them in force. Please contact Insurance Specialists, Inc. at 1-888-474-1959 for costs and complete details.

Insurance coverage is issued by Metropolitan Life Insurance Company, New York, NY 10166.



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