

Supplement your healthcare coverage with Dental Insurance.

Help safeguard your family's health and your wallet.

With a MetLife Dental HMO/Managed Care Plan, you may be able to benefit from significant savings on routine preventive care and not-so-routine dental treatments and procedures.

You asked. We answered.

Why sign up for Dental Insurance? Find out with some FAQs.

How do I select a participating dentist?

A. You can select one of the thousands of carefully screened dentists who participate in the network¹ by visiting our online Find a Dentist directory at metlife.com.

Who can enroll in the plan?

A. You and your eligible family members, for example, your spouse and dependents.

Are all members of my family required to choose the same dentist?

A. No. Each family member may select a different dentist — and may change his or her selection up to once a month.

What if I, or someone in my family, needs a specialist?

A. Your primary dentist coordinates all specialty care.

What about "out-of-network" coverage?

A. Benefits are available only with participating providers. There are no "out-of-network" benefits, unless the member has an out-of-area emergency.

What types of services does the plan cover?

A. More than 400 services and procedures are covered, including cleanings, crowns, extractions, orthodontics, veneers, implants, root canals and X-rays.

How can the plan save me money?

A. Think about this: Having a good dental plan in place can help you save money every year.² Having a good dental plan in place means you're more likely to visit the dentist for routine preventive care. You can use your benefits to lessen the financial impact ² of costly emergency dental treatments that may run into the hundreds or even thousands.

How are claims processed?

A. Dentists may submit claims for you, which means you have little to no paperwork. You can track your claims online and even receive email alerts when a claim has been processed. If you need a claim form, visit metlife.com/mybenefits or call 1-800-GET-MET8.

What about waiting periods?

A. There are no waiting periods, annual maximums or claim forms.

How much is my annual deductible?

A. There are no deductibles with a Dental HMO/Managed Care Plan.

How do I pay for my dental plan?

A. Premiums will be conveniently paid through payroll deductions, so you don't have to worry about writing a check or missing a payment.

Do you have a mobile app?

A. For added convenience, MetLife's Mobile App³ is available on the App Store and Google Play. After downloading, you can use it to find a dentist, view your claims, access your ID card, and more.

How do I pay for my dental plan?

A. Premiums will be conveniently paid through payroll deductions, so you don't have to worry about writing a check or missing a payment.

Enroll in Dental Insurance during annual enrollment.

Questions? Call MetLife Customer Service: 1-800-GET-MET8 (1-800-438-6388)

- 1. 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.
- 2. 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.
- 3. To use the MetLife Mobile App, employees can choose to register at metlife.com/mybenefits from a computer or directly through the app. Certain features of MetLife Mobile App are not available for MetLife Dental Plans.

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.

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 costs and complete details.

