

2019 Dental Plan

MetLife Dental PPO



	IN-NETWORK	OUT-OF-NETWORK
Annual Deductible (per person)	None	\$50 per person
Preventive Care Exam - (twice per calendar year) Prophylaxis - (twice per calendar year)	No deductible The Plan pays 100% of discounted in-network fees	No deductible The Plan pays 80% of reasonable and customary (R&C) charges
Minor Care Oral surgery Extractions Amalgams Endodontics Periodontics	The Plan pays 80% of discounted in-network No deductible	The Plan pays 50% of R&C charges, after annual deductible (deductible applies to minor and major care combined)
Major Care Bridgework Dentures Crowns Inlays and onlays Reparation and replacement of bridges, crowns, inlays, onlays, Dentures Implants— 1. Provided no more than once for the same tooth position in a 60-month period. 2. Repaired not more than once in a 12-month period. 3. Supported prosthetics but no more than once for the same tooth position in a 5-year period.	The Plan pays 50% of discounted in-network fees No deductible	The Plan pays 50% of R&C charges, after annual deductible (deductible applies to minor and major care combined)
Annual Benefit Maximum	\$1,500/person	\$1,000/person

If you have questions, need additional information, or help in locating a participating MetLife dentist (there are over 125,000 nationwide) please call MetLife at 866-526-0965 M-F 8:00 a.m. to 11:00 p.m. EST or the Airline Retiree Benefit Plan Service Center at 1-844-413-1989.

*For residents of TX, LA, MS and MT, out-of-network preventive care will be covered at 100% due to state mandates.

Like most group benefits programs, benefit programs offered by MetLife contain certain exclusions, exceptions, waiting periods, reductions, limitations, and terms for keeping them in force.