

# 2019 Dental Plan

## MetLife Dental PPO



	IN-NETWORK	OUT-OF-NETWORK
<b>Annual Deductible</b> (per person)	None	\$50 per person
<b>Preventive Care</b> 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
<b>Minor Care</b> 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)
<b>Major Care</b> 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)
<b>Annual Benefit Maximum</b>	\$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.