Comparing Your Options for Group Dental Benefits

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The information in this chart provides a general overview of the available plan options to help you make a more informed benefit decision. Please refer to your enrollment materials for complete details on each plan.

PLAN FEATURES	Preferred Dentist Program: PPO ¹	Managed Dental Plans: Dental HMO/Managed Care ²
CHOICE OF DENTISTS	You have the flexibility to choose any licensed dentist, in or out of the network, and still receive benefits. Your costs may be higher when you go to an out-of-network dentist*.	This plan requires you to pre-select a dentist who participates in the network in order to receive benefits. Each enrolled family member may select a different participating dentist, and has the ability to change dentists up to one time each month.
SPECIALTY CARE	No need for a referral for specialty care. Just select a dentist and make an appointment.	Your selected participating dentist will provide you with the name of a network specialist. Just call that specialist to schedule your appointment. No pre-authorization is required. Any co-payment for services is listed on your plan's Schedule of Benefits. This co-payment applies whether the services are provided by your selected participating dentist or by a network specialist.
ACCESS TO DENTISTS WHEN TRAVELING	When traveling within the U.S., you have access to one of the largest networks in the industry. You may also use an out-of-network dentist**.	Because Dental HMO/Managed Care programs are based on the use of defined networks, general dental care is not accessible while traveling. The only exception is in an emergency situation when you are unable to receive care from your selected participating dentist. Please refer to your plan coverage documents provided in your enrollment booklet for details.
NETWORK DISCOUNT	All participating dentists have agreed to accept negotiated fees as payment in full for in-network covered services. These fees typically range from 15%-45% less than the average charges in the same community. Negotiated Fees refers to the fees that in-network dentists have agreed to accept as payment in full for covered services, subject to any co-payments, deductibles, cost sharing and benefits maximums. Negotiated fees are subject to change.	This plan provides access to hundreds of dental services that may be considerably lower in cost than your cost would be without this plan. 4, You are responsible for the co-payment for each covered service that is listed on your Schedule of Benefits, so you know what your out-of-pocket costs will be up front.
QUALITY OF NETWORK DENTISTS	All participating dentists have to go through a rigorous selection process. ⁵	All participating dentists have to go through a rigorous selection process ⁵ .
BENEFITS	This plan typically includes a yearly deductible and an annual benefits maximum. Please refer to the Plan Summary included in your enrollment booklet for benefits specific to your plan offering.	This plan is not subject to deductibles or annual maximums. Out-of-pocket costs for covered services are typically calculated based on co-payments as listed in the plan's Schedule of Benefits. Please refer to your enrollment booklet for information specific to your plan offering.

Like most group benefit programs, benefit programs offered by MetLife and its affiliates contain certain exclusions, exceptions, waiting periods, reductions, limitations and terms for keeping them in force. Please contact MetLife or your plan administrator for complete details. "Savings from enrolling in the MetLife Preferred Dentist Program will depend on various factors, including the cost of the program, how often participants visit the dentist and the costs of services rendered." International Dental Travel Assistance services are administrator for complete details. "Savings from enrolling in the MetLife Preferred Dentist Program are underwritten by Mack assistance such Assistance and Virginia Surety are not affiliated with MetLife and any of its affiliates, and the services they provide are separate and apart from the benefits provided by MetLife. Referral services are not available in all locations. 1. Group dental insurance policies featuring the Preferred Dentist Program are underwritten by Metropolitan Life Insurance Company, a New York NY 10166. 2. Dental Managed Care Plan benefits are provided by Metropolitan Life Insurance Company, a New York NY 10166. 2. Dental Managed Care Plan benefits in Fig. SafeGuard Health Plans, Inc., a Florida corporation in FL; SafeGuard Health Plans, Inc., a Florida corporation in FL; SafeGuard Health Plans, Inc., a Florida corporation in FL; SafeGuard Health Plans, Inc., a Florida corporation in FL; SafeGuard Health Plans, Inc., a Florida corporation in FL; SafeGuard Health Plans, Inc., a Florida corporation in FL; SafeGuard Health Plans, Inc., a Florida corporation in FL; SafeGuard Health Plans, Inc., a Florida corporation in FL; SafeGuard Health Plans, Inc., a Florida corporation in FL; SafeGuard Health Plans, Inc., a Florida corporation in FL; SafeGuard Health Plans, Inc., a Florida corporation in FL; SafeGuard Health Plans, Inc., a Florida corporation in FL; SafeGuard Health Plans, Inc., a Florida corporation in Florida; The Plans Health Plans, Inc., a Florida corpor

