Why is having a good dental plan so important?

Because keeping a healthy smile can be important to maintaining overall health.

Maintaining good oral health matters. Staying on top of your care is the key to preventing costly problems that can add up. Plus, going to the dentist regularly can help prevent problems that have been linked to stroke or heart disease.¹

Having dental coverage makes it easier to visit the dentist and helps lower your costs. You get support to keep up with dental cleanings and other preventive care that helps you avoid costly problems and live healthier. Now that’s something to smile about!

Regular visits to the dentist are key to having a healthy smile.²

Two valuable plan options to choose from:

**Dental PPO**
- Provides benefits for a broad range of covered services/procedures.
- Flexibility to choose any licensed dentist, in or out of the network.
- Additional savings when you visit an in-network dentist. In-network dentists have agreed to MetLife’s negotiated fees for covered services, which are typically 30–45% below the average charge for the same or similar services in the same geographic area.³
- No paperwork, in- or out-of-network, if your dentist submits your claims for you.

**Dental HMO/Managed Care**⁴
- Broad network of carefully screened general dentists and specialists who provide quality dental care at reduced cost.
- At time of enrollment, pre-select a dentist who participates in the network.
- No waiting periods, claim forms, deductibles or annual maximums.

For added convenience, MetLife’s Mobile App⁵ is now available on the iTunes® App Store and Google Play. After downloading, you can use it to find a participating dentist, view your claims and see your ID Card.
Comparing your choice of plans:
The information below compares the two plan options to help you make a more informed decision. Please refer to the enrollment materials for complete details.

<table>
<thead>
<tr>
<th>Features</th>
<th>Preferred Dentist Program PPO</th>
<th>Dental HMO/Managed Care Plan</th>
</tr>
</thead>
<tbody>
<tr>
<td>Eligibility</td>
<td>Available to individuals and their family members nationwide</td>
<td>Available to residents of CA, FL, NJ, NY and TX</td>
</tr>
<tr>
<td>Choice of Dentists</td>
<td>You have the flexibility to choose any licensed dentist, in or out of the network. Your cost may be higher when you visit an out-of-network dentist.</td>
<td>You pre-select a dentist, at time of enrollment, who participates in the network. Each family member may select a different participating dentist.</td>
</tr>
<tr>
<td>Specialty Care</td>
<td>No referral needed for specialty care.</td>
<td>Your selected dentist will determine if you need the services of a specialty care provider.</td>
</tr>
<tr>
<td>Network Discounts</td>
<td>All participating dentists have agreed to accept negotiated fees as payment in full for covered services. These fees typically range from 30%–45% less than the average charges in the same community.</td>
<td>You have access to hundreds of dental services at costs that may be considerably lower than your cost would be without this plan.</td>
</tr>
</tbody>
</table>


3. Based on MetLife data. Negotiated fees refer to the fees that participating dentists have agreed to accept as payment in full for covered services rendered by them, subject to any copayments, deductibles, cost sharing and benefits maximums. Negotiated fees are subject to change.

4. See table above for state availability. 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.

5. Based on internal analysis by Metlife. Savings from enrolling in a dental benefits program will depend on various factors, including costs of the program, how often members visit a dentist and the cost of services rendered.

6. Certain features of the MetLife Mobile App are not available for all MetLife Dental Plans. Before using the MetLife Mobile App, you must register at metlife.com/mybenefits from a computer or directly through the app.

7. In California, orthodontic and pedodontic specialty services requires pre-approval. Your selected participating dentist will contact SafeGuard (a MetLife company) for pre-approval. Once approved, your dentist will contact you with the name of a participating specialist.

Like most group benefit programs, benefit programs offered by MetLife and its affiliates contain certain exclusions, exceptions, reductions, limitations, waiting periods and terms for keeping them in force. Please contact MetLife or your plan administrator for costs and complete details.