

Find out how you can save on your dental costs



As a participant in a MetLife dental plan featuring the Preferred Dentist Program, you have options to help you and your family achieve your oral health goals and save money.

When you visit a general dentist or a specialist who is in the network, your out-of-pocket costs are usually lower. That's because participating dentists have agreed to accept negotiated fees that are usually 30-45% less than the average charges in the same community.¹ Lower fees can help you cut your final costs and stretch your annual maximums.

In particular, the cost of specialty care like implants, root canals and crowns can really add up. That's why it's good to know the network is there to help you manage your out-of-pocket costs. You can view your potential savings on in-network vs. out-of-network fees by using the Dental Procedure Tool² located on metlife.com/mybenefits. Take a look at the sample below which shows how much you could save by going to an in-network specialist.

Average charge for an implant specialty service is \$1,700 – \$2,100.

	In-Network	Out-of-Network
Specialist Average Charge ³	\$1,700 – \$2,100	
MetLife Negotiated Fee	\$1,459	NA
MetLife Pays ⁴ (based on [50%] coinsurance amount for this type of service)	\$729.50	\$850 – \$1,050
Your Out-of-Pocket Cost⁵	\$729.50	\$850 – \$1,050

Approximate savings from visiting a participating dentist: \$120.50 – \$320.50⁵

Your savings is the difference between the in-network out-of-pocket cost and the out-of-network out-of-pocket cost.

The chart above is a typical example of average in-network savings in your area. It shows that you usually save more when you stay in the network. So the next time you need dental care, find out what your plan covers and what you could save by going to a participating general dentist or specialist.

To check your coverage or find a general dentist or specialist, log in to metlife.com/mybenefits or call **1-800-942-0854**. You can also ask your dentist to recommend a network specialist in your community.

Best of all, participating dentists and specialists have undergone a careful selection process.⁶ You will never need a referral. So you get convenient access to quality care and support for better savings.

Stay in the network and save!

1. Based on internal analysis by MetLife. 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.
2. The Dental Procedure Fee Tool application is provided by VerifPoint, an independent vendor. This tool does not provide the payment information used by MetLife when processing your claims. Prior to receiving services, pretreatment estimates through your dentist will provide the most accurate fee and payment information.
3. Approximate costs provided by VerifPoint, Inc., an industry source independent of MetLife.
4. This example reflects an in-network coinsurance amount of 50 percent and an out-of-network coinsurance amount of 50 percent for major services.
5. The potential savings is based on the average charges. Actual savings will vary depending on the out-of-network dentist's actual charge for the service.
6. 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, rather than MetLife's. If you should have any questions, contact MetLife Customer Service.

Like most 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 for complete details.

