

Dental Solutions with Small Businesses in Mind



THE METLIFE DENTAL ADVANTAGE

Navigating through an ever-changing benefits landscape can be a challenge for a small business. We make it easier. Count on us to help you balance cost concerns with employee needs to deliver the right dental benefits for your company.

Maximize the value of your dental benefits

Our dental solutions are backed by 55+ years of experience working with thousands of small businesses like yours. Choose MetLife for expertise, savings and convenience that you and your employees will value.

Plan design options — designed for small business needs

- A range of plan design choices to meet your unique objectives
- Solutions based on latest clinical research and market trends
- Tools and resources to empower employees to manage their oral health

See the next page for an overview of our dental solutions for companies with 2 – 9 employees.

Local dentists your employees want

- More than 344,000 dentist access points in our network¹
- 51% increase in our network access points since 2011¹
- In-network savings that exceed that national average by 2%²
- In-network utilization rises above the industry average by 9.7%²

Exceptional service — driving satisfaction

- Prompt, expert claims payments add up to our exceptional client satisfaction

THE RESULTS SPEAK VOLUMES³

75% of claims processed within one business day	97% of claims processed within ten business days
89% of claims processed within five business days	96% of participants happy with claims experience

Work with us and feel confident you're delivering the right dental coverage for your company and your employees.

Customer-Focused Solutions | Exceptional Service | Proven Expertise



Customer-focused Dental Solutions for Companies with 2 – 9 Employees

Our variety of flexible options will help you balance cost concerns while providing the dental coverage your employees need. Here's an overview. Ask your MetLife representative for details.

	OPTIONS FOR EMPLOYERS WITH EXISTING DENTAL COVERAGE	OPTIONS FOR EMPLOYERS WITH NO PRIOR DENTAL COVERAGE
COINSURANCE For the following states: AL, CT, GA, LA, MS, MT, and TX	<ul style="list-style-type: none"> • 100/80/50 (in network) — 100/80/50 (out of network) • 100/50/50 (in network) — 100/50/50 (out of network) 	<ul style="list-style-type: none"> • 100/50/50 (in network) — 100/50/50 (out of network)
COINSURANCE For all other states	<ul style="list-style-type: none"> • 100/90/60 (in network) — 100/80/50 (out of network) • 100/80/50 (in network) — 100/80/50 (out of network) • 100/80/50 (in network) — 80/60/40 (out of network) • 100/50/50 (in network) — 100/50/50 (out of network) 	<ul style="list-style-type: none"> • 100/80/50 (in network) — 80/60/40 (out of network) • 100/50/50 (in network) — 100/50/50 (out of network)
ANNUAL MAXIMUMS	<ul style="list-style-type: none"> • \$1,000 for groups with 2 – 4 employees • \$1,000, \$1,200, or \$1,500 for groups with 5 – 9 employees with an in-force maximum of \$1,500 	<ul style="list-style-type: none"> • \$1,000
DEDUCTIBLES	<ul style="list-style-type: none"> • \$25 or \$50 	<ul style="list-style-type: none"> • \$50
ENDODONTICS (ROOT CANAL)/ PERIODONTIA	<ul style="list-style-type: none"> • Covered as Type B services • Covered as Type C services 	<ul style="list-style-type: none"> • Covered as Type C services
ORTHODONTIA⁴	<ul style="list-style-type: none"> • Covered at 50% for children up to age 19 (state restrictions apply) with \$1,000 annual maximum • Not covered 	<ul style="list-style-type: none"> • Not covered
OUT-OF-NETWORK REIMBURSEMENT	<ul style="list-style-type: none"> • 90th percentile of Reasonable & Customary charges⁵ • MAC (if allowed) — Reimbursements are based on the maximum allowable charge, which is the in-network negotiated fee⁶ 	<ul style="list-style-type: none"> • 90th percentile of Reasonable & Customary charges⁵ • MAC (if allowed) — Reimbursements are based on the maximum allowable charge, which is the in-network negotiated fee⁶
WAITING PERIODS	<ul style="list-style-type: none"> • No benefit waiting periods • 1 of 6 standard allowable benefit waiting periods 	<ul style="list-style-type: none"> • Late Entrant benefit waiting period

GET EXPERT GUIDANCE FOR CONFIDENT DECISIONS.

Contact your MetLife representative today.

Availability of products and features are based on MetLife's guidelines, group size, underwriting and state requirements.

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Like most insurance policies and benefit programs, insurance policies and benefit programs offered by Metropolitan Life Insurance Company and its affiliates contain certain exclusions, exceptions, waiting periods, reductions of benefits, limitations and terms for keeping them in force. Please contact MetLife for complete details.

Group dental plan/Program benefits featuring the MetLife Preferred Dentist Program are provided by Metropolitan Life Insurance Company, 200 Park Avenue, New York, NY 10166.

¹ MetLife internal data, March 2016

² Ruark Consulting Dental PPO Network Study, 2014

³ MetLife internal data, year-end 2015

⁴ Orthodontia requires at least 5 enrolled lives. Groups with 5 to 9 enrolled lives must have prior orthodontia coverage to be eligible.

⁵ Out-of-network benefits are payable for services rendered by a dentist who is not a participating provider. The Reasonable & Customary charge is based on the lowest of (1) the dentist's actual charge, (2) the dentist's usual charge for the same or similar service(s), or (3) the charge of most dentists of similar training and experience in the same geographical area for the same or similar services as determined by MetLife.

⁶ Negotiated fees refer to the fees that participating dentists have agreed to accept as payment in full for services rendered by them. Negotiated fees are subject to change.



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