

## Dental

Metropolitan Life Insurance Company

### Monthly Premiums

	<b>High Plan</b>	<b>Low Plan</b>
Employee Only	\$41.91	\$17.20
Employee + 1 Dependent	\$79.10	\$33.59
Employee + 2 or more Dependents	\$116.04	\$64.68

### Network: PDP Plus

The Preferred Dentist Program was designed to help you get the dental care you need and help lower your costs. You get benefits for a wide range of covered services — both in and out of the network. The goal is to deliver cost-effective protection for a healthier smile and a healthier you.

	<b>In-Network<sup>1</sup></b>	<b>Out-of-Network<sup>1</sup></b>
<b>HIGH PLAN</b>		
<b>Coverage Type:</b>	<b>In-Network % of Negotiated Fee<sup>2</sup></b>	<b>Out-of-Network<sup>1</sup> % of R&amp;C Fee<sup>4</sup></b>
Type A - Preventive	100%	100%
Type B - Basic Restorative	80%	80%
Type C - Major Restorative	50%	50%
Type D – Orthodontia	50%	50%
<b>Deductible<sup>3</sup></b>		
Individual	\$50	\$50
Family	\$150	\$150
<b>Annual Maximum Benefit:</b>		
Per Individual	\$1500	\$1500
<b>Orthodontia Lifetime Maximum</b>	Ortho applies to Child Only Child to age 19	
	\$1000 per Person	\$1000 per Person
<b>Dependent Age:</b>	Eligible for benefits until the day that he or she turns 26.	
<b>LOW PLAN</b>		
<b>Coverage Type:</b>	<b>In-Network % of Negotiated Fee<sup>2</sup></b>	<b>Out-of-Network<sup>1</sup> % of R&amp;C Fee<sup>4</sup></b>
Type A - Preventive	80%	80%
Type B - Basic Restorative	70%	70%
Type C - Major Restorative	0%	0%
Type D – Orthodontia	NA	NA
<b>Deductible<sup>3</sup></b>		
Individual	\$50	\$50
Family	\$150	\$150
<b>Annual Maximum Benefit:</b>		
Per Individual	\$750	\$750
<b>Dependent Age:</b>	Eligible for benefits until the day that he or she turns 26.	