

Frequently Asked Questions

Q. Why is Dental insurance important?

A. A good dental plan makes it easier for you to protect your smile and save.¹ With the Preferred Dentist Program, you get coverage for cleanings, exams, X-rays and more. Keeping up with your dental cleanings and other preventive care now, can help you avoid costly dental problems and treatments in the future.

Q. How do I find a participating dentist?

A. There are thousands of general dentists and specialists to choose from nationwide, so you are sure to find one who meets your needs. Look for a list of participating dentists online at www.metlife.com/dental.

Q. May I choose a non-participating dentist?

A. You are always free to select any general dentist or specialist. However, you usually save more when you visit a participating dentist. He/she has agreed to accept negotiated fees as payment in full for covered services. Negotiated fees typically range from 15 - 45% below the average fees charged in a dentist's community for similar services.¹ Non-participating dentists have not agreed to accept negotiated fees. So you may be responsible for any difference in cost between the dentist's fee and your plan's benefit payment.

Q. Can I get an estimate of my out-of-pocket expenses?

A. Yes. We recommend that you request a pre-treatment estimate for services totaling more than \$300. Simply have your dentist submit a request online at www.metdental.com or call 1-877-MET-DDS9. You and your dentist will receive an estimate for most procedures while you are still in the office. Actual payments may vary depending upon plan maximums, deductibles, frequency limits and other conditions at time of payment.

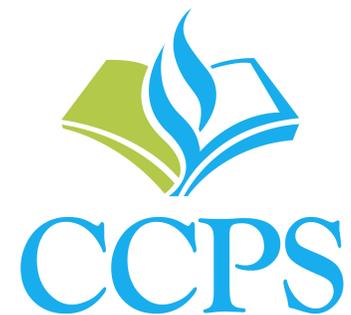
Q. What types of services does the plan cover?

A. A number of dental procedures, including:²

- ✓ Exams and cleanings
- ✓ X-rays
- ✓ Fillings
- ✓ Root canals
- ✓ And much more



Get protection against costly emergency dental treatments.



Collier County Public Schools



continued >>

Q. How does the plan save me money?

A. Think about this: The average family of four spends \$1,824 a year on dental services,³ not including the cost of braces. Having a good dental plan in place can help you save money every year. You also get protection against costly emergency dental treatments that may run into the hundreds or even thousands.

Q. Who can enroll in the plan?

A. You and your eligible family members. For example, your spouse and dependents.

Q. How are claims processed?

A. Dentists may submit claims for you which means you have little or no paperwork. You can track your claims online and even receive e-mail alerts when a claim has been processed. If you need a claim form, visit www.metlife.com/mybenefits or call 1 800 GET-MET8.

Q. How do I pay for my Dental plan?

A. Premiums will be conveniently paid through payroll deduction. So you don't have to worry about writing a check or missing a payment.

Q. When can I enroll?

A. You can enroll during your open enrollment period.

HAVE OTHER QUESTIONS?

Please call
MetLife directly at
1 800 GET-MET8
(1-800-438-6388)
and talk with a
benefits consultant.

¹ Savings from enrolling in a dental benefits plan will depend on various factors, including plan design and premiums, how often participants visit the dentist and the cost of services rendered.

² Those services defined under your dental benefits summary are covered. Please review your plan benefits summary for a more detailed list of covered services.

³ National Average; Source: Bureau of Economic Analysis, 2012.

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.

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