

# DENTAL PPO PLAN

With The City of Dallas' Dental PPO Plan, you may use any dentist you wish. When you choose a MetLife Dentist, though, you receive service at discounted prices.

When you use a non-MetLife dentist, you pay more out of your own pocket since you're responsible for 100% of the amount the dentist charges that exceeds MetLife's network-negotiated fee.

	In-Network % of Negotiated Fee*	Out-of-Network % of Negotiated Fee*
<b>Deductible (Per Person**)</b>	\$50	\$50
<b>Annual Maximum Benefit (Per Person)</b>	\$1,750	\$1,750
<b>Orthodontia Lifetime Maximum (Per Person)</b>	\$1,750	\$1,750
<b>Coverage Type</b>		
<b>Type A - Preventive</b>		
<ul style="list-style-type: none"> <li>Two cleanings every 12 months</li> <li>Two exams every 12 months</li> <li>Two fluoride treatments per calendar year for dependent children up to 16th birthday</li> <li>Full mouth X-rays: one per 36 months</li> <li>Bitewing X-rays: one set per calendar year for adults; one per calendar year for children</li> </ul>	100%	100%
<b>Type B - Basic Restorative</b>		
<ul style="list-style-type: none"> <li>Fillings</li> <li>Extractions</li> <li>General Anesthesia: When dentally necessary in connection with oral surgery, extractions or other covered dental services</li> </ul>	80%	80%
<b>Type C - Major Restorative<sup>†</sup></b>		
<ul style="list-style-type: none"> <li>No waiting period for major services</li> <li>Crown, Denture, and Bridges</li> <li>Endodontics</li> <li>Periodontics</li> <li>Oral Surgery</li> </ul> <sup>†</sup> Implants not covered	50%	50%
<b>Type D - Orthodontia</b>		
<ul style="list-style-type: none"> <li>All dental procedures performed in connection with orthodontic treatment are payable as Orthodontia</li> </ul>	50%	50%

<b>Dental PPO Bi-Monthly Rate</b>	
<b>Employee Only</b>	\$16.39
<b>Employee + Spouse</b>	\$30.15
<b>Employee + Child(ren)</b>	\$30.55
<b>Employee + Family</b>	\$42.61

\* Negotiated Fee refers to the fees that participating dentists have agreed to accept as payment in full, subject to any copayments, deductibles, cost sharing and benefits maximums. Negotiated fees are subject to change.

\*\* Subject to the section titled Dental Benefits: Limitations and Additional Charges and Dental Benefits: Exclusions.

Note: Child(ren)'s eligibility for dental coverage is from birth up to age 26.