

Dental Benefits

The PPO/Indemnity Dental Plan - MetLife

The PPO/indemnity dental plan that MCCCCD offers to its employees is through MetLife. MetLife pays a percentage of the cost of covered treatment after you satisfy an annual deductible for Basic and Major Care. The cost of preventative exams and cleaning is covered in full. The deductible is the amount you must pay out of your own pocket before the plan starts paying benefits. Since preventive treatment is so important to maintaining your dental health, the deductible does not apply to Routine Preventive Care.

Type A - Routine Preventive Care Includes:

- ❖ exams
- ❖ cleanings
- ❖ fluoride applications for children under age 18
- ❖ x-rays
- ❖ space maintainers

Type B - Basic Care Includes:

- ❖ fillings
- ❖ general anesthesia
- ❖ oral surgery
- ❖ simple extractions
- ❖ periodontics
- ❖ crown, denture, & bridge repair
- ❖ endodontics
- ❖ repair

Type C - Major Care Includes:

- ❖ crowns/inlays/onlays
- ❖ bridges/dentures
- ❖ implants

Type D - Orthodontia

Freedom of Choice

There is an in-network and out-of-network option for MCCCCD employees covered under MetLife's dental plan. MetLife's participating dentists, which are considered in-network, agree to accept MetLife's allowable fee as payment in full. When using an out-of-network dentist you will be required to pay the reasonable and customary charges based on the lowest of a dentist's usual, actual or community average charge as determined by MetLife.

Under the MetLife program, each member of your family may choose any dentist for services. If you wish to change your dentist for any reason, you are free to do so at any time without complicated paperwork or the requirement to wait until the start of the next month for reassignment. Simply visit the dentist of your choice.

How Does The Program Work?

You may visit the dentist of your choice. Using the provider list, determine if your dentist is participating with the plan.

If your dentist is a Participating PPO Dentist (a dentist who has signed an agreement with MetLife) the advantages are:

- ❖ The dental office will complete the claim form and submit it to MetLife for payment.



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- ❖ The dentist has agreed to accept the total charges or MetLife's "allowable fee" for services rendered, whichever is less.
- ❖ The dentist agrees to abide by MetLife's benefit determination and administration policies, and agrees to accept payment directly from MetLife.

If your dentist is a Non-Participating dentist (a dentist who is considered out-of-network):

- ❖ You will be responsible for the submission of the claim form to MetLife.
- ❖ MetLife will pay its benefit payment directly to you and you will be responsible to pay the dentist for the full amount of their charges.
- ❖ The payment for the treatment will be based on the billed charges or MetLife's usual, customary, or reasonable fees (UCR), whichever is less.

Pre-Determination Of Benefits

Pre-determination approval protects the patient from unanticipated charges. Prior to performing extensive dental work, (\$250 or more), ask your dentist to submit a pre-estimate of benefits to MetLife. This permits MetLife to review the treatment plan for alternative treatment procedures which may be less costly, provided they do not affect the quality of care. You will know in advance what your financial responsibility is for the treatment prior to the actual service being performed.

Out-Of-Area Services

MetLife's program covers dental services provided in any state or country. If you are on vacation, or have children going to school in another state, you can be assured of the same level of benefits that you would be entitled to in Arizona. MetLife's plan is not restricted to "emergency only" care received out of state; all dental services covered in Arizona are also a benefit anywhere else in the world!

Questions?

For a complete listing of participating dentists, covered services, co-payments, emergency procedures, coverage limitations and rules which apply to MCCCED dental benefits, contact the member services department.



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Dental Benefits Comparison Chart

Type of Expense	Assurant	MetLife	
		In-Network	Out-of-Network**
Annual deductible (<i>Combined In-Network and Out-of-Network</i>)	none	\$50 per person /\$100 per family	
Office Visit Exams X-rays Cleaning and scaling	\$10.00 No Charge \$0.00-5.00 \$5 adult/child	covered in full no deductible <i>twice in fiscal year</i>	covered based on fee allowance no deductible <i>twice in fiscal year</i>
Topical fluoride treatment	No Copay for child under age 18; copay applies to cleaning	under age 18 only covered in full no deductible <i>twice in fiscal year</i>	under age 18 only covered at 90% no deductible <i>twice in fiscal year</i>
Space maintainers	patient pays \$70-105	Same as above	Same as above
Simple extraction	patient pays \$20.00	covered at 90% after deductible	covered at 90% after deductible
Surgical extraction	patient pays \$55.00	covered at 90% after deductible	covered at 90% after deductible
Impacted-tooth extraction	patient pays \$65-\$135	covered at 90% after deductible	covered at 90% after deductible
Amalgam filling Composite filling	patient pays \$20-\$70	see MetLife booklet for cov. limitations	see MetLife booklet for cov. limitations
Root canal	patient pays \$125-\$465	covered at 90% after deductible	covered at 90% after deductible
Crowns and bridges	patient pays \$265 plus lab fee	covered at 60% after deductible	covered at 60% after deductible
Complete upper or lower denture	patient pays \$365.00 plus lab fee	covered at 60% after deductible	covered at 60% after deductible
Periodontics	patient pays \$45-\$350	covered at 90% after deductible	covered at 90% after deductible
Gold: Fillings Inlay and onlay Crowns	all co-payments are exclusive of gold; the patient is responsible for the actual laboratory fee in addition to co-pay	covered at 60% after deductible	covered at 60% after deductible
Orthodontics: Adults Children (up to age 19) Initial diagnostic work-up and x-rays	25% discount is given from specialist UCR fee	An alternate benefit revision is allowable. plan pays 50% up to \$1,000 per person for lifetime	
Specialists*	15% discount Endodontist 25% discount all others Co-pay schedule will apply		
Max. benefit per person	unlimited	\$2,000 excluding orthodontic expenses	
<p>Assurant: All Assurant co-pays listed above apply to General Dentitsts Only. *Specialty Benefit Amendment Co-pay schedule will apply for Specialist's accepting SPA. MetLife: **Out-of-Network patients receive reimbursement based on MetLife's non-participating dentists' fee allowance, but are responsible for the remainder of the charges.</p>			