




Find the right plan for your employees and your business

With MetLife's flexible plan designs, you can balance the unique needs of your employees with your own benefit cost objectives, while benefiting from MetLife's knowledge of the latest research and industry best practices. The result is a carefully tailored plan that satisfies both your employees and your bottom line.

Innovative solutions for plan design

We offer a variety of fully insured dental benefit plans for employers with 10 to 499 employees. Our standard plan designs and their flexibility offer solutions to help you meet your goals.

- Preferred Provider Organization (PPO) plans:
 - Consumer-Driven plans
- Plan Structure Options:
 - Voluntary¹ and Employer-Sponsored options
 - Single and dual-option² plans
- The VisionSavings Eyecare Program³

More than plan design

To help you successfully manage costs, we apply our strengths in other areas to achieve an affordable price point:

- **Network Stability:** Dentists who join our network stay in our network. Turnover is consistently less than 1.5% per year, and only 1.34% in 2006.⁴
- **Cost Control:** MetLife's negotiated PDP-fees resulted in combined savings on plan payments and employees' out-of-pocket costs of \$802 million in 2006.⁵
- **Claims processed quickly and accurately:** In 2006, 99% were processed within 10 business days with 99% accuracy.⁴
- **eBenefits from MetLife:** Our online benefit tools — MetLink® for benefit administrators, MyBenefits and our Oral Health Library for employees and MetDental for dentists — streamline the benefits delivery process, making it easier for you and your employees to get more done in less time.
- **Ease of Administration:** 95% of employers are satisfied with MetLife's implementation process; 98% with MetLife's account management process.⁶

So, join the more than 35,000 customers — including 43 of the top one hundred FORTUNE 500® companies⁷ — that trust MetLife to administer their group dental benefits.⁸

¹ Available to groups with 10 or more eligible employees.

² Available to groups with 25 or more eligible employees.

³ The VisionSavings Eyecare Program is offered by EyeMed Vision Care, Mason, Ohio. EyeMed Vision Care is not affiliated with Metropolitan Life Insurance Company and its affiliates.

⁴ MetLife data as of year-end 2006.

⁵ Savings calculations based on analysis of 2006 claims information, comparing MetLife participating PDP dentists reported usual charges for services to MetLife's negotiated fees for those same services.

⁶ Mid-Large and Small Market Account Management and Case Implementation Studies, MetLife data as of year-end 2006. Based on response from those who participated in and responded to the survey.

⁷ 2006 MetLife Market Research. FORTUNE 500®, April 2005. FORTUNE 500® is a registered trademark of FORTUNE® magazine, a division of Time, Inc.

⁸ Includes insured and self-funded customers. MetLife data as of February 2007.

MetLife's Flexible Plan Designs for Groups with 10-499 Employees⁹

The following plan options are available to employers based on group size, underwriting and state requirements.

COINSURANCE CHOOSE THE OPTION THAT FITS YOUR EMPLOYEES' NEEDS.	STANDARD PLANS – offer coinsurance for preventive and basic services; or preventive, basic and major services TRANSITION PLANS – administered at the employer level, offer coinsurance for preventive and basic; and phase in coinsurance for major services GRADED PLANS – administered at the employee level, offer coinsurance for preventive and basic; and phase in coinsurance for major services
ANNUAL MAXIMUMS	Choices range from \$250 to \$3,000 (in \$50 increments) ¹⁰
DEDUCTIBLES	Choices range from \$0 to \$300 (in \$5 increments) ¹⁰
ORTHODONTIA (OPTIONAL)	Choose coverage for: <ul style="list-style-type: none"> • Child Only (up to age 19, state restrictions apply), or • Adult & Child Choose: <ul style="list-style-type: none"> • Coinsurance levels ranging from 20% to 80% (in 5% increments)¹⁰ • Orthodontia maximums ranging from \$500 to \$3,000¹⁰ • No deductible for orthodontia treatment
REIMBURSEMENTS OUT-OF-NETWORK	There are two options for out-of-network reimbursement: <ul style="list-style-type: none"> • R&C – Reimbursements are based on reasonable and customary charges.¹¹ Multiple options available. • MAC – Reimbursements are based on the maximum allowable charge, which is the in-network negotiated fee¹²
ALLOCATION OF SERVICES	Two standard allocation of service options available: <ul style="list-style-type: none"> • Comprehensive Coverage (Oral surgery/Periodontics in Basic) • Primary Coverage (Oral surgery/Periodontics in Major) Additional flexible plan designs are also available.
EMPLOYER CONTRIBUTIONS	<ul style="list-style-type: none"> • Employer-Sponsored Plans — Employer's contribution is between 50% and 100% of the employees' premium. • Voluntary Plans — Employer's contribution is between 0% and 49% of the employees' premium. For MetLife's Dual Option plan, employers must pay a minimum of 50% of the premium for the low plan option for each employee.
MINIMUM PARTICIPATION REQUIREMENTS¹³	
EMPLOYER SPONSORED	SINGLE OPTION PLANS For Standard, Transition and Graded plans: <ul style="list-style-type: none"> • At least 50% of all eligible employees must participate, with a minimum of 10 enrolled DUAL OPTION PLANS At least 65% of all eligible employees must participate with a minimum of 25 enrolled
VOLUNTARY	SINGLE OPTION PLANS For Standard (preventive and basic services), Transition and Graded plans: <ul style="list-style-type: none"> • At least 35% of all eligible employees must participate, with a minimum of 10 enrolled For Standard (preventive, basic and major services) plans: <ul style="list-style-type: none"> • At least 35% of all eligible employees must participate, with a minimum of 10 enrolled; or • 25%–34% of all eligible employees must participate, with a minimum of 10 enrolled if the plan includes a Benefit Waiting Period DUAL OPTION PLANS At least 50% of all eligible employees must participate with a minimum of 100 eligible

For more information, contact your insurance broker, benefits consultant or MetLife representative today.

⁹ Certain plan designs may be subject to restrictions and not available in all states.

¹⁰ For additional flexibility, contact your MetLife representative. State restrictions apply.

¹¹ The R&C charge is the lowest of (1) the dentist's actual charge, (2) the dentist's usual charge for the same or similar services, or (3) the usual charge of other dentists or other providers in the same geographic area equal to one of the following percentile of charges as determined by MetLife based on charge information for the same or similar services or supplies maintained in MetLife's

Reasonable and Customary Charge records: 90th, 80th, 99th, 70th and 51st. The percentile of charges will depend on the plan design chosen.

¹² MetLife's negotiated or Preferred Dentist Program (PDP) fees refer to the fees that dentists participating in MetLife's Preferred Dentist Program (PDP) have agreed to accept as payment in full, for services rendered by them.

¹³ Minimum participation requirements may be greater in certain states.

Benefits for the **if in life**SM

MetLife[®]

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