

# A dental plan to last a lifetime



## A portable dental solution to complement your group dental plan:

Offer your employees the option to enroll in an individual dental program that they can take with them into retirement — all with no administrative work or cost for you only if employee paid.

HIGHLY DESIRED  
BENEFIT

75%

of employees feel dental is a must-have benefit<sup>1</sup>

60%

seniors age 65 and older will experience gum disease<sup>2</sup>

## Offer your employees a dental plan that allows them to keep their current benefits and dentist:

Our individual dental plans make it easier to care for your employees, now and in the future. With MetLife TakeAlong Dental<sup>SM</sup>, employees that will no longer be eligible under the group plan can continue to have access to exceptional dental care — including the same high-quality network and servicing experience.

- **Provide robust coverage** and consistency across your employee population.
- **There's no administration for you** — our full-service solution extends from enrollment to billing, service and renewal.
- **Employees enjoy a simple enrollment process** with a range of options to meet their needs.

## With our industry-leading portable dental solution, employees can:

- **Continue to receive the same great dental benefits and network access**, with the ability to keep their current dentist and the plan they know and trust.
- **Easily make the switch from group dental to a portable plan**, with flexible enrollment options and a suite of resources to guide them through the process.
- **Enjoy a lifelong dental benefit**, unlike with other short-term solutions such as COBRA.<sup>3</sup>
- **Choose from a variety of individual dental programs to meet their unique needs**, including PPO, DHMO, and Discount Plans.

You can count on our experienced professionals to collaborate with you to recommend the right benefit solutions for all segments of your workforce. With us, you'll feel confident you've made the best decision.

## Program Options

### PPO OPTION — PROGRAM HIGHLIGHTS:

	HIGH BENEFIT	MEDIUM BENEFIT	LOW BENEFIT
	Maximums, deductibles, waiting periods, and reimbursement percentages for preventive & diagnostic, basic restorative, major restorative and child orthodontia <sup>4</sup> services apply in and out-of-network		
<b>Calendar Year Maximum Benefit</b> (Per Person)	\$2,000	\$1,500	\$750
<b>Individual Deductible</b> (Annual)	\$25	\$50	\$75
<b>Family Deductible</b> (Annual)	\$75	\$150	\$225
<b>Deductible Applies To</b>	Basic and Major Restorative Services		
<b>Preventive &amp; Diagnostic Services</b>	100%	100%	100%
<b>Basic Restorative Services</b>	80%	70%	50%
<b>Major Restorative Services</b>	50%	50%	Not covered
<b>Dependent Child Orthodontia<sup>4</sup></b>	50%	Not covered	
<b>Dependent Child Orthodontia Lifetime Maximum</b> (Per Person)	\$1,000	Not covered	
<b>Basis of Reimbursement</b>	Maximum Allowable Charge <sup>5</sup>		
<b>Waiting Period</b>	6 months for Basic Restorative Services; 12 months for Major Restorative Services and Child Orthodontia	6 months for Basic Restorative 12 months for Major Restorative	6 months for Basic Restorative Services
<b>Dependent Age</b>	A dependent child is eligible for benefits up to his/her 26th birthday. <sup>4</sup>		
<b>Contribution Level</b>	100% Employee Paid		
<b>Enrollment, Billing, Service &amp; Renewals</b>	Handled by MetLife with little to no work for you.		
<b>Available To</b>	Those not eligible under your group plan, including part-timers and consultants, as well as employees retiring or leaving your organization.		

### DENTAL HMO/MANAGED CARE OPTION — PROGRAM HIGHLIGHTS:

Available to residents of California, Florida, New York and Texas.

Two benefit coverage levels: Low or High.

A network dentist gets pre-selected at time of enrollment from a broad network of carefully screened general dentists<sup>7</sup> and specialists who provide dental care at a reduced cost.

No waiting periods, claim forms, deductibles or annual maximums.

### METLIFE DISCOUNT DENTAL<sup>6</sup> OPTION — PROGRAM HIGHLIGHTS:

A discount program, not insurance, for dental services from a nationwide network.

Savings<sup>8</sup> of 5% to 50% on most dental procedures.

5% to 20% savings<sup>8</sup> on orthodontics including braces and retainers.

5% to 20% reduction on specialist's fees.

Cosmetic dentistry included.

Any dentist participating in the plan can be visited.

Not available in Washington, Utah and Vermont.



## Get expert guidance for confident decisions. Contact your MetLife representative today.

For complete program details, including exclusions & limitations, please visit [MetLifeTakeAlongDental.com](https://www.MetLifeTakeAlongDental.com).

1. MetLife's 23rd Annual U.S. Employee Benefit Trends Study, 2025.
2. Centers for Disease Control and Prevention, About Periodontal (Gum) Disease, May 2024.
3. MetLife TakeAlong Dental is not COBRA coverage and does not affect any employer obligation to provide COBRA coverage.
4. Dependent child orthodontia is covered under the High Option benefit only. Orthodontia covers children up to age 19. Adult orthodontia is not covered under any program option.
5. The out-of-network Maximum Allowable Charge is equal to the in-network negotiated fee. Negotiated fees refer to the fees that in-network dentists have agreed to accept as payment in full for certain services, subject to any co-payments, deductibles, cost sharing and benefits maximums. Negotiated fees are subject to change. Negotiated fees do not apply to non-covered services in states that prohibit limitations for services not covered under a plan. Participating providers in these states may charge their non-negotiated fees for non-covered services. Percentages shown are based on the maximum allowable charge, even when a covered service is provided by an out-of-network dentist, except in AK, NV, MA and MT. In these states, out-of-network percentages shown are based on a percentile of the reasonable and customary (R&C) charge. The R&C charge is based on the lowest of: (1) the dentist's actual charge for a covered service; (2) the dentist's usual charge for the same or similar service; or (3) the amount charged by most dentists in the same geographic area for the same or similar service as determined by MetLife. You may have greater out-of-pocket expenses when you visit an out-of-network dentist. Contact your MetLife representative for complete details.
6. MetLife Discount Dental Program is provided through Careington International Corporation, Frisco, TX (Careington). Careington is not affiliated with MetLife or its affiliates.  
The MetLife Discount Dental Program IS NOT INSURANCE and is not intended to replace health insurance. This plan does not meet the minimum creditable coverage requirements under M.G.L. c.111M and 956 CMR 5.00. This plan is not a Qualified Health Plan under the Affordable Care Act. The range of discounts will vary depending on the type of provider and service. The plan does not pay providers directly. Plan members must pay for all services but will receive a discount from participating providers. [The list of participating providers is available on this site.] A written list of participating providers is available upon request. You may cancel within the first 30 days after effective date or receipt of membership materials (whichever is later) and receive a full refund. Discount Plan Organization and administrator: Careington International Corporation, 7400 Gaylord Parkway, Frisco, TX 75034; phone (800) 441-0380. This program is not available in Washington, Utah and Vermont.  
For Colorado Residents: This policy DOES NOT include coverage of pediatric dental services as required under the Affordable Care Act. Coverage of pediatric dental services is available for purchase in the State of Colorado and can be purchased as a stand-alone Program. Please contact your insurance carrier, agent, or Connect for Health Colorado to purchase either a Program that includes pediatric dental coverage or an Exchange-qualified stand-alone dental Program that includes pediatric dental coverage.
7. Certain providers may participate with MetLife through an agreement that MetLife has with a vendor. Providers available through a vendor are subject to the vendor's credentialing process and requirements, not MetLife's. If you should have any questions, contact MetLife Customer Service.
8. Savings from enrolling in a dental benefits plan will depend on various factors, including the cost of the plan, how often participants visit a dentist and the cost of services rendered.

Dental Managed Care Plan benefits are provided by Metropolitan Life Insurance Company, a New York corporation in NY. Dental HMO plan benefits are provided by: SafeGuard Health Plans, Inc., a California corporation in CA; SafeGuard Health Plans, Inc., a Florida corporation in FL; SafeGuard Health Plans, Inc., a Texas corporation in TX; and MetLife Health Plans, Inc., a Delaware corporation and Metropolitan Life Insurance Company, a New York corporation in NJ. The Dental HMO/Managed Care companies are part of the MetLife family of companies.

"DHMO" is used to refer to product designs that may differ by state of residence of the enrollee, including but not limited to: "Specialized Health Care Service Plans" in California; "Prepaid Limited Health Service Organizations" as described in Chapter 636 of the Florida statutes in Florida; "Single Service Health Maintenance Organizations" in Texas; and "Dental Plan Organizations" as described in the Dental Plan Organization Act in New Jersey.

Availability of MetLife TakeAlong Dental is based on MetLife's guidelines, group size and state approvals. Contact your MetLife representative for complete details.

Dental benefits are provided by Metropolitan Life Insurance Company (MetLife) or an affiliate of MetLife. Certain administrative services are provided by Careington BenefitSolutions, Frisco, TX (Careington). Careington is not affiliated with MetLife or its affiliates. Like most benefits 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 for costs and complete details.

Like most group benefits programs, benefit programs offered by MetLife and its affiliates contain certain exclusions, exceptions, waiting periods, reductions, limitations and terms for keeping them in force. You may be financially responsible for copayments, deductibles, or any other amounts in excess of those MetLife is required to pay for covered services as described in your dental certificate and/or policy. Ask your MetLife representative for costs and complete details.