



## Dental Insurance Transitioning to MetLife

Effective January 1, 2017, MetLife is pleased to partner with the North Carolina Office of State Human Resources to offer employees and their covered dependents dental benefits with more options!

We are here to help you get the dental care you and your family need. Our goal is to make your transition to MetLife as smooth as possible. Some of the most common services that may be affected when moving from one carrier to another include orthodontic, endodontic (e.g., root canal) and prosthodontic (e.g., crowns, bridgework and dentures) services. We have established “transition of care guidelines” for participants who may be in the middle of their dental treatment.

### Orthodontia Treatment prior to January 1, 2017:

Please be sure that any portion of orthodontia treatment for you or your dependent(s) that occurred prior to January 1, 2017 is submitted to the previous carrier for reimbursement. Any remaining benefits for treatment after January 1, 2017 will be paid by MetLife according to the Plan.

To assist in determining any remaining orthodontia benefits payable, MetLife will need your dentist to submit the first claim to MetLife after January 1, 2017. Your dentist will need to provide the full orthodontic treatment plan, along with the following pieces of information:<sup>1</sup>

- Orthodontic appliance code from the current American Dental Association *Common Dental Terminology* (CDT) manual;
- Date the appliance was placed and total number of estimated months of treatment;
- Amount paid by the previous carrier; and
- Total orthodontic treatment fee.

After the claim is submitted to MetLife, MetLife will subsequently pro-rate the orthodontia benefits and begin handling payments according to the Plan. This process ensures that the total benefit paid between the two carriers does not exceed the Lifetime Orthodontia Maximum under the MetLife High Option Dental PPO Plan.

Here is an example of how MetLife would calculate orthodontia benefits for treatment that began prior to January 1, 2017:

John Smith is covering his son, Johnny, under the MetLife High Option Dental PPO Plan effective January 1, 2017. The MetLife High Option Dental PPO Plan considers orthodontia benefits at 50% coinsurance level, up to the \$1,500 orthodontia lifetime maximum.

Johnny's orthodontia claim indicates a 12 month treatment plan and a total case fee of \$4,800. The orthodontia treatment began with initial banding in October 2016 and two (2) months of treatment in November and December 2016 prior to the transition to MetLife.

The previous carrier paid out \$800 for the banding and monthly benefits under the prior Dental PPO Plan.

Initial banding fee: 20% of \$4,800 total case fee at 50% coinsurance level = \$480

Remaining case fee: \$4,800 total case fee – \$960 initial banding fee considered before 50% coinsurance level = \$3,840

Monthly benefit: \$3,840 remaining case fee / 12 months of treatment at 50% coinsurance level = \$160/month for November – December 2016

MetLife will consider the remaining ten (10) months of treatment and will prorate the claim for services rendered on or after January 1, 2017. MetLife will pay out \$700 orthodontia benefits in quarterly installment payments through October 2017.

Remaining case fee: \$960 initial banding fee considered before 50% coinsurance level + \$640 November & December 2016 monthly benefit considered before 50% coinsurance level = \$3,200

Monthly benefit: \$3,200 remaining case fee / 10 months of treatment at 50% coinsurance level = \$160/month for January – October 2017 until the \$1,500 Lifetime Orthodontia Maximum has been reached

Both carriers paid \$1,500 in total orthodontia benefit for Johnny's claim – \$800 under the previous carrier and \$700 under MetLife.

*Note: This is only an example of how MetLife will calculate the remaining benefits and does not represent actual benefits that may be issued.*

### **Endodontic and Prosthodontic Treatment prior to January 1, 2017:**

Some of the most common services that may be affected when moving from one carrier to another include endodontic (e.g., root canal) and prosthodontic (e.g., crowns, bridgework and dentures) services.

*Q. I started my crown, bridgework or root canal<sup>2</sup> in October 2016, but it will not be completed until February 2017. How will my claim be handled?*

**A. A tooth opened prior to the MetLife effective date or treatment (preparation and impressions) started prior to the MetLife effective date will be considered an eligible expense<sup>3</sup> under the MetLife High Option and Low Option Dental PPO Plans.**

*Q. I started my dentures treatment before January 1, 2017. What will happen now?*

**A. Final impressions for appliances completed prior to, but delivery made after the January 1, 2017 effective date will be considered eligible expenses<sup>3</sup> under the MetLife High Option Dental PPO Plan subject to MetLife High Option PPO Plan frequency limits.**

*Q. I have a missing tooth, how will that be handled under the MetLife Dental PPO Plans effective January 1, 2017?*

**A. The Missing Tooth Exclusion is waived under the MetLife High Option Dental PPO Plan. Services performed to replace a missing tooth, including teeth missing prior to the January 1, 2016 effective date, will be covered under the MetLife High Option Dental PPO Plan subject to plan provisions in place at the time, such as verification of dental necessity.**

### **Questions?**

For more information relating to transition of care for orthodontic, endodontic (e.g., root canal) and prosthodontic (e.g., crowns, bridgework and dentures) services, please contact MetLife at **1-855-676-9441**. Representatives are available Monday through Friday, from 8:00 AM until 11:00 PM Eastern Time.

Beginning January 1, 2017, you can also visit the MyBenefits website at [www.metlife.com/mybenefits](http://www.metlife.com/mybenefits) (enter 'NCFlex' as the company name) to find more information about your MetLife Dental PPO Plan, recent Dental claims and other useful tools. You will need to create your own unique User ID and password. Click on the Register Now button to provide your first name, last name, date of birth, SSN and e-mail address.

We are very much looking forward to serving you!

<sup>1</sup> The treatment plan outlines the details of expected orthodontic care that includes timeframes for placement and ongoing treatment, as well as associated fees. If the dentist does not submit treatment plans or claims on the patient's behalf, the patient can also send this information to: MetLife Dental Claims, P.O. Box 981282, El Paso, TX 79998-1282.

<sup>2</sup> Endodontic and Prosthodontic treatments, as well as other services eligible for transition of care, are subject to annual maximums and plan frequency limits as set by the MetLife Dental Plan. Prosthodontic treatments are only covered under the MetLife High Option Dental PPO Plan.

<sup>3</sup> Please note that MetLife assumes that the dentist is using the completion date (not the preparation date) as the billing date. Based on this assumption claims received with dates of service prior to the MetLife effective date will be declined.

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.