## **Mohawk Premium Dental Plan Overview**

BENEFIT HIGHLIGHTS	IN-NETWORK (PDP) Preferred Dentist Program	OUT-OF-NETWORK Non-Preferred Dentist
Type A - Preventive: Exams, Cleanings, Bitewing and Full-Mouth X-Rays <sup>1</sup> , Fluoride, Sealants	100% PDP Fee	100% PDP Fee
Type B - Minor / Basic Restorative: Fillings, Simple Extractions <sup>2</sup> , Periodontal Maintenance	80% PDP Fee	80% PDP Fee
Type C - Major / Restorative: Crowns, Dentures, Endodontics, Periodontal Surgery, Oral Surgery, General Anesthesia / IV Sedation, Implant Services	50% PDP Fee	50% PDP Fee
Deductible per Calendar Year: For Type B and Type C Covered Services	\$50 Individual / \$150 Family	\$50 Individual / \$150 Family
Yearly Individual Maximum: For the following Covered Services: Type A, Type B, Type C	\$1,750	\$1,750
Orthodontics: Lifetime Orthodontic Maximum	50% PDP Fee \$1,500	50% PDP Fee \$1,500

- Frequency limitations and other plan limits apply to certain services, please refer to your Dental Certificate for Plan details

- MetLife's PDP is a network of Dentists who have contracted with MetLife to provide dental care at negotiated rates

- Your cost may be significantly higher if you use an out of network provider

- Plan effective 1/1/2017

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