

# SPREADING THE SMILE

NCD ELITE 1500

BY  **MetLife**

**Annual Maximum Benefit \$1,500** *per person*

**NY/CT ONLY**

| PREVENTIVE CARE                               |                                                                                                                                                        | No Waiting Period                                                                                                                                                                                         |
|-----------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 100% Coverage                                 | <ul style="list-style-type: none"><li>• Routine Exam (2 per 12 months)</li><li>• Bitewing X-rays (1 per 12 months)</li></ul>                           | <ul style="list-style-type: none"><li>• Cleaning (2 per 12 months)</li><li>• Fluoride for children under age 14 (1 per 12 months)</li></ul>                                                               |
| BASIC CARE                                    |                                                                                                                                                        | No Waiting Period                                                                                                                                                                                         |
| 80% Coverage                                  | <ul style="list-style-type: none"><li>• Full Mouth/Panoramic X-rays</li><li>• Fillings</li></ul>                                                       | <ul style="list-style-type: none"><li>• Sealants (Child under 14)</li><li>• Space Maintainers (Child under 14)</li></ul>                                                                                  |
| MAJOR CARE                                    |                                                                                                                                                        | 12 Month Waiting Period                                                                                                                                                                                   |
| Year 1 - 0% Coverage<br>Year 2 - 50% Coverage | <ul style="list-style-type: none"><li>• Oral Surgery</li><li>• Crowns</li><li>• Bridges</li><li>• Surgical Extractions</li><li>• Endodontics</li></ul> | <ul style="list-style-type: none"><li>• Periodontal Maintenance (Deep Cleaning Maintenance)</li><li>• Dentures &amp; Denture Repair</li><li>• Anesthesia</li><li>• Implants (limitations apply)</li></ul> |
| Deductible                                    | \$50 per Individual / \$150 per Family per year                                                                                                        |                                                                                                                                                                                                           |
| Network                                       | MetLife PDP Plus PPO Network                                                                                                                           |                                                                                                                                                                                                           |

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 **Marcos**  
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 **MetLife**  
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**LXE**  
HEARING

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