MetLife
PO Box 2006
Aurora, IL 60507-2006

Dental PPO Plan
Metropolitan Life Insurance Company

The **Trustees of the NYC Electrical Division Health and Welfare Fund** are pleased to announce that Metropolitan Life Insurance Company, MetLife, will be taking over as plan administrator for the current Dental Benefit Plan for Active and Retiree's.

You will be automatically enrolled in the new plan and need to do nothing to start using your benefits on or after November 1, 2025. Your dentist will be able to validate your enrollment and obtain coverage information, simply by providing your SSN. ID Cards are not required, or used to validate eligibility, but a generic copy has been included below in the event you would like to keep a copy in your wallet as an added level of security. Benefits will be equal to or better than the current UHC plan.

Summary of Benefits
Dental Insurance – Retirees

Employer Sponsored Dental		
Class Description	Retirees	
	In-Network	**Out-of-Network**
Reimbursement	Negotiated Fee Schedule	Schedule Amount
Type A – Preventive	100%	100%
Type B – Basic	100%	100%
Type C – Major	100%	100%
Type C – Implants	100%	70%
Calendar Year Deductible applies to:	B & C	B & C
▪ **Individual**	$0	$0
▪ **Family**	$0	$0
	Aggregate	Aggregate
Calendar Year Maximum	$3,500 *(applies to A,B,C services)*	$3,500 *(applies to A,B,C services)*
Orthodontia	100%	100%
Orthodontia Lifetime Maximum	$4,000	$3,000

Below is your Dental Identification Card, available for subscribers only. While you're not required to present this card to your dental provider as proof of coverage or confirm your eligibility, you may print this page and present it to your dental provider at your next appointment.

MetLife
Dental PPO Plan

Group Name: NYC Electrical Division Health and Welfare Fund Retirees

Group Number: 5910319

Network: PDP Plus

Fully insured – state regulated

Questions and Answers

Dental carrier transition

Starting November 1, 2025, MetLife will be the new carrier for your Dental Benefits. We realize you may have questions about your coverage and want to let you know what to expect during this transition. Starting November 1, 2025, MetLife will begin processing any claims incurred on or after November 1, 2025.

Can members use non-participating dentist?

Yes. You are always free to select the dentist of your choice. However, if you choose a non-participating dentist, your out-of-pocket costs may be higher.

Will my plan or benefits change?

Rest assured, there will be no impact or changes to coverage. Your dental plan will continue to operate as it does today.

How do I find an In-Network Dentist?

- Go to metlife.com
- Click on "Find a Dentist" next to "How can we help you?“
- Select "**PDP PLUS**" Enter your Zip, City, or State and select the "Find a Dentist" button

Do I need a new ID card?

ID Cards are not required, or used to validate eligibility, but a generic copy has been included in the event you would like to keep a copy in your wallet as an added level of security.

Will there be a new website or app that I will access to get my personal benefit information?

Yes, metlife.com/mybenefits

You will be able to obtain claim forms, review claim status, receive pre-treatment estimates[1], access your digital ID Cards, locate a dentist and view plan information online at metlife.com/mybenefits on or after 11/1/2025. MetLife strongly recommends that you have your dentist submit a pretreatment estimate to MetLife if the cost is expected to exceed $300. When your dentist suggests treatment, have him or her send a claim form, along with the proposed treatment plans and supporting documentation, to MetLife. An explanation of benefits (EOB) will be sent to you and the dentist detailing an estimate of what services MetLife will cover and at what payment level. Actual payments may vary from the pretreatment estimate depending upon annual maximums, deductibles, plan frequency limits and other plan provisions at time of payment.

[1] Savings from enrolling in a dental benefits plan [featuring the MetLife Preferred Dentist Program will depend on various factors, including the cost of the plan, how often participants visit a dentist and the cost of services rendered."

*Negotiated Fees refers to the fees that in-network dentists have agreed to accept as payment in full for covered services, subject to any co-payments, deductibles, cost sharing and benefits maximums. Negotiated fees are subject to change. Savings from enrolling in a dental benefits plan will depend on various factors, including the cost of the plan, how often participants visit the dentist and the cost of services rendered.

Group dental insurance plans featuring the Preferred Dentist Program are provided by Metropolitan Life Insurance Company, New York, NY.

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.

Obtain claim forms, review claim status, locate a dentist and view plan information online at mybenefits.metlife.com.

Mail completed claim forms to: MetLife Dental Claims, PO Box 981282, El Paso, TX 79998-1282.

Contact MetLife at **1-800-828-0027**

- Monday - Friday to speak with a customer service representative
- Confirm eligibility, order claim forms or request dentist directories

Providers: 1-877-638-3379 (metdental.com)

Visit the New York City Electrical Division Health and Welfare Fund MetLife Microsite for additional tools and resources.