

Frequently Asked Questions (FAQs)

Do I need to choose a new dentist?

Not necessarily, however, the network for MetLife will differ slightly from the current Aetna plans.

- For the PPO plan – you have the flexibility to choose any licensed dentist, in or out of the network, however your cost may be higher when you visit an out-of-network dentist.
- For the DHMO plan – you pre-select a dentist at the time of enrollment who participates in the network.

If your current dentist does not participate in the network and you would like to encourage him or her to apply, ask your dentist to contact MetLife for an application.

How do I find a MetLife dental provider?

You can find the names, addresses, languages spoken, and phone numbers of participating dentist by searching the online Find a Dentist directory at www.MetLife.com. Select **PDP Plus** or **Dental HMO/Managed Care** for your network, depending on which plan you enrolled in. If enrolling in the DHMO, select **MET185** for the plan and note the Facility Number (which will be needed during your enrollment).

Are all members of my family required to choose the same dentist?

No, each family member may select a different dentist and may change his or her selection up to once a month.

Are there any plan design changes?

There will be no plan design changes from the previous Aetna plans.

Are the MetLife DHMO fees the same?

The MetLife DHMO schedule of fees will have the same or less expensive costs than the current Aetna DMO plan.

Will my payroll deductions change?

The paycheck costs for dental coverage will decrease slightly from last year's rates.

Do I need a referral for specialty care?

- For the PPO plan – no referral is needed for specialty care. You may choose any specialty dentist (in or out of network) and call them directly to make an appointment
- For the DHMO plan – If your selected participating dentist determines that you need the services of a specialty care provider, he/she will provide you with the name of a network specialist after obtaining pre-approval from MetLife

Does MetLife have a mobile app?

Yes, the MetLife Mobile App is available on the App Store and Google Play. After downloading, you can use it to find a dentist, view your claims, access your ID card, and more.

Do I need a MetLife Dental ID card to receive dental services?

No, in most cases you do not need a physical ID card to receive dental services. Participating dentists can verify your coverage directly with MetLife using your name, date of birth, and/or member ID number.

For your convenience, you can access a digital ID card through the MetLife Mobile App.

How are claims filed?

Dental providers usually submit claims, which means you have little to no paperwork. You can track your claims online and even receive email alerts when a claim has been processed.

If your dentist does not submit a claim on your behalf, you can file a claim directly with MetLife online or by mail. If you need a claim form, visit <https://www.mybenefits.metlife.com/homepage> and go to Claim Center, click on Complete Form button to access the claim form. The form can also be found by navigating to the “Document and Forms” tab on the top menu bar or call 1-800-GET-MET8 to have a form mailed to you.

Do I need to stop or delay dental care treatment that is already in progress?

No. If you are in the middle of an eligible dental treatment plan, MetLife has [Transition of Care](#) guidelines to help determine how treatment already in progress may be covered. Contact MetLife before delaying or changing ongoing care. MetLife will review your treatment and plan information to determine how benefits may apply.

What steps do I need to take if I’m in the middle of treatment?

Review the [Transition of Care](#) guidelines. If you have additional questions, please contact MetLife at 1-877-435-2981.

If I have vision benefits with Texas Health, will I use the same website for my dental benefits?

Yes, dental, vision and pet insurance benefits can be accessed via <https://www.mybenefits.metlife.com/>.