



City of Petaluma

Benefits Summary



	MetLife Dental Plan	
	Effective July 1, 2017	
Network	MetLife PDP	Non-Network*
Dependent Age	To 26	
Benefits Annual Maximum	\$2,000	\$2,000
Orthodontia Lifetime Maximum		
– Units 6,7,10, Council	\$1,000	\$1,000
– Units 1,2,3,4,8,9,11	\$2,000	\$2,000
Calendar Year Deductible		
– Individual	\$0	\$0
– Family	\$0	\$0
Preventive Services		
– X-rays	100%	100% UCR
– Exams	100%	100% UCR
– Cleanings	100%, 3 times per year	100% UCR, 3 times per year
– Fillings, Posterior Composites	100%	100% UCR
Basic Services		
– Oral Surgery	80%	80% UCR
– Endodontics (Root Canals)	80%	80% UCR
– Periodontics (Gum Treatment)	80%	80% UCR
– Crowns	80%, 5 year replacement limitation	80% UCR, 5 year replacement limitation
Major Services		
– Bridges	50%	50% UCR
– Prosthetics (dentures)	50%	50% UCR
– Implants	50%	50% UCR
– Cosmetic Dentistry	Not covered	Not covered
UCR Percentile	n/a	99th

* Payable at Usual, Customary and Reasonable (UCR) fees.



City of Petaluma

Benefits Summary



MetLife Vision Plan With VSP

Effective July 1, 2017

Network	VSP	Non-Network
Dependent Age	To 26	
Exam Copay	\$25	Up to \$45 allowance
Materials Copay	None	n/a
Standard Lenses – Single Vision – Bifocal Vision – Trifocal Vision	100% 100% 100%	Up to \$30 allowance Up to \$50 allowance Up to \$65 allowance
Progressive Lenses – Units 6,7,10, Council – Units 1,2,3,4,8,9,11	Up to \$55-175 copay Up to \$55-175 copay	Up to \$50 allowance Up to \$50 allowance
Frames – Units 6,7,10, Council – Units 1,2,3,4,8,9,11	Up to \$120 allowance (\$65 Costco) Up to \$180 allowance (\$100 Costco)	Up to \$55 allowance Up to \$70 allowance
Contact Lenses - Medically Necessary	100%	Up to \$210 allowance
Contact Lenses - Cosmetic – Units 6,7,10, Council – Units 1,2,3,4,8,9,11	Up to \$120 allowance Up to \$180 allowance	Up to \$105 allowance Up to \$105 allowance
Frequency – Exams – Lenses – Frames	12 months 12 months 12 months	
Discounts for Additional Items	20%	n/a