Detailed View for MetLife

Group Number: 300860

Claims Mailing Address: P.O Box 981282 El Paso, TX 79998-1282 Phone #: (877)638-3379 Network Participation: Network Participation: In Network Payer ID: 65978 Group Number: 300860 Plan Name: APPLE INC. Fee Schedule: Direct or Contracted Fee Schedule Does this plan utilize a Table of Allowance?: No Waiting Periods: Waiting Period does not apply.				
Network Participation: In Network Payer ID: 65978 Group Number: 300860 Plan Name: APPLE INC. Employer Name: APPLE INC. Fee Schedule: Direct or Contracted Fee Schedule Does this plan utilize a Table of Allowance?: No				
Payer ID: 65978 Group Number: 300860 Plan Name: APPLE INC. Fee Schedule: Direct or Contracted Fee Schedule Does this plan utilize a Table → Allowance?: No				
Payer ID: 65978 Group Number: 300860 Plan Name: APPLE INC. Fee Schedule: Direct or Contracted Fee Schedule Does this plan utilize a Table → Allowance?: No				
Group Number: 300860 Plan Name: APPLE INC. Employer Name: APPLE INC. Fee Schedule: Direct or Contracted Fee Schedule Does this plan utilize a Table of Allowance?: No				
Plan Name: APPLE INC. Employer Name: APPLE INC. Fee Schedule: Direct or Contracted Fee Schedule Does this plan utilize a Table of Allowance?: No				
Fee Schedule: Direct or Contracted Fee Schedule Does this plan utilize a Table of Allowance?: No				
Does this plan utilize a Table of Allowance?: No				
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Waiting Periods: Waiting Period does not apply.				
Missing Tooth Clause: Missing Tooth Exclusion does not apply.				
Notes:				
Policy Effective: 09/23/2013				
Plan Begins: 01/01/2024				
Filing Limit December, 2025				
Diagnostic				

Diagnostic %	100	Diagnostic Deductible:	0.00		
(D0120/D0150) Exam %	100	Exam Frequency:	4 visits in 1 calendar		
D0140 %	100	Frequency	4 visits in 1 calendar		
Does Deductible Apply to	0.00	Can Treatment Be Done	Yes, but not FMD 4355		
D0140?		Same Day as D0140?			
Do Exams share frequency (D	Yes				
D0210 FMX %	100	Frequency:	1 visits in 2 calendar		
D0220 PA %	100	Frequency:	No Frequency		
D0270-D0274 Bitewings %	100	Frequency:	1 visits in 1 calendar for patients more than 20 years old		
D0330 Pano %	100	Frequency:	1 visits in 2 calendar		
Does FMX(D0210) and Pano(D0330) Share Frequency?	Yes	Deductible Applies Towards X-Rays?	No		
Diagnostic Notes:					
	BY 6 MONTHS for patients less than by GSD. Less than a third of plans o	,			

%) and deductible applies.

	Preve	ntative Care		
Preventative %	100	Preventative Deductible:	0	
D1110 Prophy Frequency:	4 visits in 1 calendar	Does Deductible Apply to Prophy?	0	
D1206 Flouride Frequency	4 visits in 1 calendar	Flouride Age Covered:	No Age Limit	
Deductible Applies Towards Flouride?		0		
D1351 Sealants %	100	Sealants Frequency:	None	
Deductible Applies Towards Sealants?	0	Sealant Teeth Covered	Second Molar Sealants - Permanent molars only, excluding wisdom teeth First Molar Sealants - Permanent molars only, excluding wisdom teeth	
Sealant Age Covered:		19		
Preventative Notes:				
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Periodontics

D4355 FMD % Des Deductible Apply to Des D435 FMD Take the Frequency: Des D435 FMD Take the Frequency: D436 Part Part Part Part Part Part Part Part				
Dess Deductible Apply to MO7 MO7 A245 Ap Pos Flap % 80 Dess D4355 FMD Take the Place of a Prophy? Day D434 /L04342 SRP %: 80 D434 /L04342 SRP %: 80 D432 /L042 Setative Flilling Freq: 80 D434 /L0434 FRIIng %: 80 D4320 Pub (L042 Setative Flilling Freq: 80 D4320 Pub (L042 Setative Flilling %: 80 D4320 Pub (L042 Setative Flilling %: 80 D4320 Pub (L042 FK %: 80 D43210 Autoint %: D40 D4320 Pub (L042 FK %: 80 D4320 Pub (L042 FK %: 90 D4320 P	Periodontics %	80	Periodontics Deductible:	50.00
FMD? Can FMD Set Day No D4245 Ap Pos Flap % 80 Can FMD Be Done On Same Day as D0180? No D4341/04342 SR %: 80 Frequency (341): No Freq Day dcumentation Share Frequency? 4 visits in 1 calendar D4341 /04342 SR %: 80 Frequency? 4 visits in 1 calendar Day dcumentation Share Frequency? 4 visits in 1 calendar D434 %: 80 Frequency: 4 visits in 1 calendar D434 %: 80 Restorative Car Restorative %: 80 Restorative Car Restorative %: 80 Restorative Car Restorative Notes: No Frequency Specified Posterior Composite D2340 Solative Filling Freq: No Frequency Specified S000 D2340 Solative Filling Freq: No Frequency Specified S000 D310 Pulp Cap Direct %: 80 D3220 PuL Can Indirect %: 80 D310 Pulp Cap Direct %: 80 D3220 PuL Cap Indirect %: 80 D3240 Solative FT%: 80 D3220 PuL Cap Indirect %: 80 D310 Pulp Cap Direct Bar Done Day DF Expl Cap Indirect are not allowed in most cases when Instrumentation and the same day as restoration** Tool Surgery Deductible: S000 D7240 %: 80 </td <td>D4355 FMD %</td> <td></td> <td>Frequency:</td> <td>1 x Lifetime</td>	D4355 FMD %		Frequency:	1 x Lifetime
Data / Data	Does Deductible Apply to FMD?	Perio deductible applies		Yes
Can 4 Quads Be Done Same Ves in most cases with proper documentation Day1 Des 1940 Perio Maintenance % B0 Frequency: 4 visits in 1 calendar b1446 %: 100 Frequency: 4 visits in 1 calendar b1446 %: 100 Frequency: 4 visits in 1 calendar Periodonit Notes: A small number of plans will have a greater frequency such as 1/36months Restorative Care Restorative %: 80 Restorative Deductible: 50.00 Composites Frequency: No Frequency Specified Downgrades To Amalgam? Downgrades Townses Emadedontic Notes: Downgrade Downgrades Townses Em	D4245 Ap Pos Flap %	80		No
Can 4 Quads Be Done Same Ves in most cases with proper documentation Day Objo Perio Maintenance % 00 Objo Periodonitic Motes: A small number of plans will have a greater frequency such as 1/36months Restorative Care Restorative %: 00 Destail Care Destained % 00	D4341/D4342 SRP %:	80	Frequency (4341):	No Freq
D4910 Perio Maintenance % 80 Frequency: 4 visits in 1 calendar D4316 %: 100 Frequency: 4 visits in 1 calendar D4316 %: 100 Frequency: 4 visits in 1 calendar D4316 %: 80 Frequency: 5000 Periodmit: Notes: A small number of plans will have a greater frequency such as 1/36months Restorative Care Restorative %: 80 Restorative Care Downgrades To Amalgam? D2340 5244 Composite Filling %: 80 D2440 Selative Filling %: 80 D3220 Periof Composite Downgrades To Amalgam? D3310 Pulp Cap Direct %: 80 D3220 Per-Molar RCT %: 80 D3320 Molar RCT %: 80 D3220 Pre-Molar RCT %: 80 D3320 Molar RCT %: 80 D3220 Pre-Molar RCT %: 80 D3320 Molar RCT %: 80 D3220 Pre-Molar RCT %: 80 D330 Molar RCT %: 80 D3220 Pre-Molar RCT %: 80 D7240 %: 50 D7240 D7240 %: 50 D7240 D7240 D7240 D7240 D7240 D7240 %: 50 D7240 P	Can 4 Quads Be Done Same	Yes in most cases with proper		Yes
D4346 %: 100 Frequency: 4 visits in 1 calendar D4381 %: B0 Frequency: 4 visits in 1 calendar D4381 %: B0 Frequency: 4 visits in 1 calendar D4381 %: B0 Restorative Care S0.00 Restorative %: B0 Restorative Care Composite are not downgraded. D2340 Sedative Filling %: 80 D2440 Sedative Filling Freq: Composite are not downgraded. D2404 Sedative Filling %: 80 D2440 Sedative Filling Freq: No Frequency Specified D310 Anterior RC %: 80 D3120 Public Cap Indirect %: 80 D310 Anterior RC %: 80 D3221 Pre-Molar RCT %: 80 D3130 Anterior RC %: 80 D3221 Pre-Molar RCT %: 80 D3130 Anterior RC %: 80 D3221 RCT Start %: 80 D7210 %: 80 Oral Surgery Deductible: 50.00 D7220 %: 80 Oral Surgery 50.00 D7240 %: 80 D30 D3221 Pre-Molar RCT %: 80 D7220 %: 80 Oral Surgery Netce: 50.00 D7240 %: 50 Denture Freq: 1 visits in 10 calendar D7240 %: 50 Denture Freq: 1 visits in 10 calendar D7240 %:	Day?	documentation	Share Frequency?	
D4381 %: 80 Frequency Periodontic Notes: A small number of plans will have a greater frequency such as 1/36 months Restorative X: 80 Restorative Care Restorative X: 80 Restorative Deductible: 50.00 D2940 Sedative Filling Freq: No Frequency Specified Downgrades To Amalgam? downgraded. D2940 Sedative Filling Freq: 80 D2940 Sedative Filling Freq: No Frequency Specified D2940 Sedative Filling K: 80 D3120 Pulp Cap Interet %: 80 Battorative Notes: Endodontics 80 D3120 Pulp Cap Interet %: 80 D3110 Pulp Cap Direct %: 80 D3220 Pre-Molar RCT %: 80 D3330 Molar RCT %: 80 D3220 Pre-Molar RCT %: 80 D3110 Pulp Cap Direct & D3120 Pulp Cap Indirect are not allowed the same day as restoration** ************************************	D4910 Perio Maintenance %	80	Frequency:	4 visits in 1 calendar
Periodontic Notes: A small number of plans will have a greater frequency such as 1/36months A small number of plans will have a greater frequency such as 1/36months 50.00 Restorative %: 80 Restorative Care Restorative X: 80 Posterior Composite Composites are not D2940 Sedative Filling Freq: No Frequency Specified Downgrades To Amalgam downgraded. D2940 Sedative Notes: Endodontic Second Se	D4346 %:	100	Frequency:	4 visits in 1 calendar
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D310 Anterior RCT %: 80 D320 Pre-Molar RCT %: 80 D330 Molar RCT %: 80 D3221 RCT Start %: 80 Endodontic Notes: *** *** *** Oral Surgery 50.00 Oral Surgery %: 80 Oral Surgery Deductible: 50.00 D7140 %: 80 50.00 50.00 D7220 %: 80 50.00 50.00 D7230 %: 80 50 7.50 D7240 %: 80 50 7.50 Can Graft Be Done Day Of Extraction? Allowed in most cases when Implants are covered but subject to review 7.50 Oral Surgery Notes: 50 Penture Age Limit: 7.50 D5110/D5120 Denture %: 50 Penture Freq: 1 visits in 10 calendar Denture Age Limit: 50 Pertial Denture Freq: 1 visits in 10 calendar Denture %: 50 Porsthodontic S 50.00 Composites are not downgraded on bicuspids. D513/D5214 Partial 50 Prosthodontic Deductible: 50.00 Composites are not downgraded on bicuspids. Distair for width S0 Porosthodontic Deductible: 50.				
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D2740 Porcelain Crown %: 50 D2740 Downgrade Code (If D2790	D2950 Build Up %:			
Applicable)	D2740 Porcelain Crown %:	50	-	D2790
			Applicable)	

D2920 Crown Recement %:		50		
D2783 3/4 Crn %:	50	D2783 Downgrade Code (If Applicable):	D2780	
D2644 Onlay %	50	D2644 Downgrade Code (If Applicable):	D2544	
D2971 Crown Under Partial %				
D6740 Bridge Abutment %:	50	Bridge Downgrades To Partial?	Yes - if 3 or more teeth are missing in the arch	
D6740 Downgrade Code (If Applicable):	D6790	D6245 Downgrade Code (If Applicable):	D6210	
Prosthodontic Notes:				

		Implants	
D6010 %	50	D6011 Implant Second	0
		Stage Uncovering %	
Implant Frequency:			
D0367 CT w/ Both Jaws %	50	Frequency:	No Frequency Specified
D0364 CT w/ Limited Field %	0364 CT w/ Limited Field % 50		No Frequency Specified
D6104 Bone graft during Implant %:		50	
6058 Implant Crown %: 50		D6058 Downgrades To:	D6062
D6057 Custom Abutment %:		50	
D6191 Semi Precision Abutment %		50	
D6192 Semi Precision Attachment %		50	
D7951 Sinus Augmentation Open Approach %		50	
D7952 Sinus Augmentation Vertical Approach %		50	
Implant Notes:			
Pre-D or phone verification is recommended for major procedures			

			Adju	nctive Care				
Adjunctive Care Pe	ercentage %							
D7880 Occlusal Or	thotic	80		Frequency:		No Freq	No Frequency Specified	
Device %:								
D9944 Night Guar	d %:	80		Frequency:		No Frequency Specified		
D9230 Nitrous Oxi	de %:							
Adjunctive Notes:								
-			Ort	hodontics				
D8090 Orthodonti	Orthodontic %: 50		Orthodontic Deductible:		50.00			
Orthodontic Lifeti	dontic Lifetime 2500.00 O		Orthodontic Remaining		2500.00			
Maximum:				Benefits:				
D8040 Orthodonti	c Limited			Orthodontic Age Maximum:				
Treatment %								
			H	listory				
Benefit Period:	lifetime		Plan Start Date:	01/01/2024	Plan Enc	Date:	12/31/2024	
In-Network Maxin	num:			OON Maximum:				
Remaining In-Network		2500.00		Remaining OON Benefits:				
Benefits:								
Deductible:		50.00				50.00		
D4910 Perio Maint	aint Date: 08/15/2022							
D4341 SRP Date:	RP Date: 12/15/2020							