



SPREADING THE SMILE

BY



MetLife

Member

Member Name:

Member ID#:

Effective Date:

Coverage Type:

Dental Plan:

PPO Network

MetLife PDP Plus

Member Care Information

NCD: (800) 485-3855

MetLife.MemberCare@NCD.com

Claims & Billing

EDI Payor ID: 65978

Group Dental Claims
PO BOX 981282
El Paso, TX 79998

Billing:

4201 Spring Valley Road
Suite 1500
Dallas, TX 75244

Dentists

Locate a Dentist:

<https://www.ncd.com/metlifedentists>

Provider Information

Claims Info & Status: (877) 638-3379

Fax: (859) 389-6505

Email: dentalinfo@metlifeservice.com

Faxback Service: (877) 638-3379

Pre-certification is requested for services expected to exceed \$300.



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