

FDIC Retiree Dental Insurance Program Frequently Asked Questions

1. [I did not complete the annual Self Certification form. Will my coverage continue next year?](#)
2. [Will I pay the same for FDIC Retiree Dental Insurance in 2026?](#)
3. [Are there any changes in dental benefits for 2026?](#)
4. [Next year, can I still use my current dentist?](#)
5. [How do I check to see if my dentist participates with MetLife?](#)
6. [Can I access an online record of my claims processed by MetLife?](#)
7. [I will probably meet my deductible between October and December. Will the deductible carry over to next year?](#)
8. [When should I submit a Pre-treatment Estimate?](#)
9. [Does the orthodontia lifetime reimbursement limit apply per family or per participant?](#)
10. [Are dental implants covered?](#)
11. [Can I get a discount on services that are not covered under the FDIC Retiree Dental Plan with MetLife?](#)
12. [My federal employee health insurance includes dental benefits. I am also enrolled in the FDIC Dental Plan. Can I file a claim to both plans?](#)
13. [I am enrolled in FDIC Dental Insurance and my FEHB includes some dental coverage. Is it worth considering enrolling for FEDVIP insurance?](#)
14. [I am considering terminating my FDIC Retiree Dental Plan enrollment. Can I re-enroll at later date?](#)
15. [If I waive Dental enrollment, and my husband/domestic partner, an FDIC retiree, enrolled me and our dependents in Self & Family coverage, will we lose our entitlement to be covered into retirement should he predecease me or we divorce?](#)
16. [Can I make a change to my Dental coverage when I retire?](#)
17. [Do I have benefits for two exams and a consultation in the same year?](#)

1. **I did not complete the annual Self Certification form.** Will my coverage continue next year?

Yes, your current level of coverage will continue if you do not complete the annual Self Certification form.

[Return to Top](#)

2. **Will I pay the same premium for FDIC Retiree Dental Insurance in 2026?**

Premiums will increase in 2026 for Standard Option Self Only and Self and Family.

Retiree Dental	Retiree Quarterly Cost
Self Only	\$31.63
Self and Family	\$93.83

[Return to Top](#)

3. **Are there any changes in dental benefits for 2026?**

There are no changes in dental benefits in 2026. The benefit structure and Participating Dental Provider network will remain unchanged. The network will be referred to as the PDP plus and represents about 300,000 participating dentist access points nationally. Remember, you may choose to go to any provider but utilizing a network provider is the best way to lower your out-of-pocket costs.

[Return to Top](#)

4. **Next year, can I still use my current dentist?**

You can continue to use your current dentist. If your dentist participates with MetLife's PDP Plus Network, the dentist's office will usually file a claim for you. If your dentist does not participate, you may have to file the claim directly with MetLife.

[Return to Top](#)

5. How do I **check to see if my dentist participates** with MetLife?

You may either check on-line at www.MetLife.com under "Find a Dentist," or call MetLife customer service at 1-800-942-0854 Monday through Friday, 8:00 a.m. to 11:00 p.m., ET. An Interactive Voice Response (IVR) system is also available to handle inquiries 24/7/365.

[Return to Top](#)

6. Can I access an **online record of my claims** processed by MetLife?

Yes, you may access a record of your dental claims processed by MetLife and a listing of Preferred Dental Providers by logging onto <https://mybenefits.metlife.com> and selecting "Federal Deposit Insurance Corporation." Just follow the easy registration process on the secure website to set up your individual username and password.

[Return to Top](#)

7. I will probably meet my deductible between October and December. Will the **deductible carry over to next year?**

Yes, the individual deductible from services completed in the 4th quarter (October through December) carry over to the next plan year. Example: If you have completed dental services during the 4th quarter 2025 and pay towards or meet your individual deductible, that deductible amount is carried over towards the next year's (2026) deductible.

[Return to Top](#)

8. When should I **submit a Pre-treatment Estimate?**

You should submit a Pre-treatment Estimate prior to starting extensive dental work. The Pre-treatment Estimate is not a guarantee of payment. It informs you and your dentist if the proposed treatment is subject to the Alternate Benefit Provision and determines the expenses that will be included as Covered Expenses.

[Return to Top](#)

9. Does the **orthodontia lifetime reimbursement limit** apply per family or per participant?

The orthodontia lifetime reimbursement limit applies per eligible participant. If you have Self & Family coverage, each participant is eligible for reimbursement for orthodontic services up to the lifetime maximum amount.

[Return to Top](#)

10. Are **dental implants** covered?

Surgical dental implants and the associated bone graft, exam, x-ray and crown are eligible for benefits subject to the alternate benefits provision. Prior to the start of treatment, you or your participating MetLife provider should submit a Pre-treatment Estimate. The participating provider will not charge you the difference between the participating provider's charge and the MetLife fee schedule.

Note: The alternative benefit provision may apply. When more than one dental service could provide suitable treatment based on common dental standards, MetLife will determine the dental service on which payment will be based and the expenses that will be included as Covered Expenses. The plan will cover the most appropriate, cost-effective method of treatment.

[Return to Top](#)

11. When I receive services from an In-Network Dentist, **will I receive a discount for non-covered services** under the FDIC Choice Dental Plan?

An in-network dentist should not bill you for amounts that are in excess of the negotiated fees that your dentist has agreed to accept as payment for services. This rule applies even if services are not covered under your specific dental plan. You should always verify that your dentist is a MetLife in-network dentist at the time of your appointment and understand the charges prior to having dental services completed. To verify if your dentist is in the MetLife network, visit www.metlife.com, enter your desired zip code, then select "PDP Plus" as the network type and enter specialty to view the listing of in-network providers.

[Return to Top](#)

12. My Federal Employee Health Benefits (FEHB) includes coverage for dental services, and I am also enrolled in the FDIC Dental Plan. **Can I file a claim to both plan carriers?**

Yes, you can submit a dental services claim to both plan carriers. The FDIC Dental Plan, which MetLife is the insurance carrier, is the primary plan carrier for you and all your dependents. This means that if you are enrolled in another group dental plan (e.g., FEHB) and are a subscriber enrolled in the FDIC Plan, you file your claim to MetLife first and then any eligible balance is filed to your other group plan second which may provide additional coverage.

[Return to Top](#)

13. I am enrolled in FDIC Dental Insurance and my FEHB includes some dental coverage. Is it worth **considering enrolling for FEDVIP** insurance?

Only you can determine what coverage is appropriate for your needs. However, be aware that:

- a) Continuing in 2026, you are responsible for 20 percent of your FDIC Standard Option Retiree Dental Insurance premium and FDIC will pay 80 percent of the premium. Under FEDVIP, you are responsible for 100 percent of the premium cost. FDIC will not contribute to the cost of FEDVIP.
- b) The FDIC Dental Plan benefits structure usually pays a higher percentage of the provider's fee than the plans under FEDVIP. The FDIC Plan allows you to choose to receive treatment from either in or out-of-network providers.
- c) Since the FDIC Dental Plan is primary, the FDIC Plan pays claims before FEDVIP pays. If the FDIC Dental Plan pays a higher portion of the claim for a service than FEDVIP does, FDIC Dental will pay its portion of the claim and FEDVIP will pay nothing. For example, say you have met the deductible for both FDIC Dental and FEDVIP and then have a tooth filled by a dentist who is a preferred provider under both Plans. If FDIC Dental pays 80 percent of the preferred provider negotiated rate for tooth filling and FEDVIP pays 55 percent, FEDVIP will pay nothing and you will pay the balance (20 percent of the negotiated rate).

[Return to Top](#)

14. **I am considering terminating my FDIC Retiree Dental Plan enrollment.** Can I re-enroll at a later date?

If you voluntarily terminate your FDIC Retiree Dental Plan Enrollment, you will not be allowed to re-enroll at a later date. However, if you are re-employed by the FDIC (i.e., reemployed annuitant) and eligible to enroll as an employee, you may continue your enrollment as a retiree and receive Choice credits as an employee. Or you may terminate your retiree enrollment and enroll as an employee with the ability to re-enroll as a retiree upon your return to retiree status.

[Return to Top](#)

15. If I **waive Dental**, but my spouse/domestic partner, an FDIC retiree, enrolls in Self & Family coverage, will I **lose my entitlement to be covered into retirement** should he/she predecease me, or we divorce/end the domestic partnership?

In the event of your spouse's/domestic partner's death or your divorce/dissolution of your domestic partnership, you should notify the Benefits Hotline as soon as possible. As an eligible survivor/retiree, your FDIC Retiree Dental Plan enrollment will transfer to your name automatically.

[Return to Top](#)

16. Can I make a **change to my Dental coverage when I retire?**

Your retirement is not a Permitted Elected Change to change your dental coverage. Retirees enrolled in the FDIC Retiree Dental Plan may change coverage due to a life event (divorce, marriage, initiating/ending a domestic partnership, death, gain or loss of dependent child) during the Plan Year. Otherwise, retirees may change coverage during the annual Self-Certification Process.

[Return to Top](#)

17. Do I have benefits for two exams and a consultation in the same year?

No, you have benefits for a combination of exam types that do not exceed two in a calendar year. For example, if you have a periodic oral evaluation (D0120) and a comprehensive periodontal oral evaluation (D0180) this would count as two procedure services reaching the maximum for the calendar year, so that, not more than the maximum allowable expense and limitation are paid under this plan.

[Return to Top](#)