

# ~ Job Posting ~

## Clinical Therapist & Team Leader

### Illinois Department of Human Services Treatment & Detention Facility

The Illinois Department of Human Services Treatment & Detention Facility is a secure residential treatment facility which serves approximately 500 detained and civilly committed adult sexual offenders.

The clinical program operates within a recently constructed new state-of-the-art treatment facility located in Rushville, Illinois. Rushville is situated in west central Illinois, and is commutable from the Macomb (home of Western Illinois University), Springfield (the State Capital), and Quincy. Rushville is within a few hours of St. Louis, Chicago and Indianapolis.

Clinical services at the facility are provided by Liberty Healthcare's experienced and dedicated team of over thirty psychologists, social workers, counselors, psychiatrists, and recreation therapists. We offer a full range of diagnostic and treatment services related to sexually deviant behavior, paraphilias and mental illness.

Due to continued growth and expansion of our clinical program, Liberty is accepting applications for full-time Clinical Therapist positions. Job responsibilities include providing a wide range of assessment, counseling, therapy and psycho-educational services; serving as an active member of multidisciplinary treatment teams; and serving as primary therapist for an assigned caseload.

A minimum of a Masters Degree in Psychology, Clinical Social Work or Counseling and professional licensure in Illinois is required, however candidates who are eligible for professional licensure or fulfilling supervision requirements will also be considered. Candidates who have prior experience providing treatment services to sexual offenders, forensic patients or a comparable client population will be given priority consideration.

A "Team Leader" position is also currently available. This position would be appropriate for a licensed Psychologist who has prior supervisory or leadership experience as well as work experience within a correctional, forensic or sex offender specific treatment program. Responsibilities of this position involve both direct clinical services (as noted above in the Clinical Therapist description) and providing leadership and supervision to clinical staff members.

As a member of our team and employee of Liberty you can expect to receive a competitive salary which is commensurate with your qualifications. Our employees receive a well rounded benefits package which includes health, dental, vision, disability, life and professional liability insurance. Our employees receive six weeks of cumulative paid time off annually. Flexible and compressed (4-day) work weeks may be accommodated. Selected out-of-town applicants receive assistance with interview travel expenses. Financial assistance with relocation expenses is also provided. Our clinicians receive financial assistance with expenses related to relevant professional association membership; professional licensure, and seminars, conferences and training. If you are not licensed professionally in Illinois, we can assist in the process and allow a reasonable amount of time for acquiring professional licensure. Non-licensed clinicians may receive supervision towards licensure requirements from our licensed staff. Details regarding Liberty's benefits may be found at the end of this information packet.

# **Illinois Department of Human Services**

## **Treatment & Detention Facility**

### **Rushville, Illinois**

In 1998, the State of Illinois passed the Sexually Violent Persons Commitment Act. Four standards must be met, for an individual to be committed under this Act:

- 1) The person must be within 90 days of release from an adult criminal sentence for a qualifying sexual offense.
- 2) The person must have a justifiable DSM-IV diagnosis of mental disorder.
- 3) The person must have a substantial probability of committing future acts of sexual violence because of his mental disorder.
- 4) It must be proved, beyond a reasonable doubt, that the person's risk of future sexual violence is the result of his mental disorder.

People who are committed under the Act are remanded to the custody of the Illinois Department of Human Services, and admitted to the *Treatment and Detention Facility* located in Rushville, Illinois.

Once admitted to this secure residential treatment facility, residents are provided with a full range of diagnostic, treatment and rehabilitative services to address sexually violent and deviant behaviors. Treatment modalities include individual and group counseling; behavior modification; psychopharmacology, substance abuse counseling; psychosocial and psycho-educational programming; and therapeutic and recreational activities. The facility presently serves 500 residents. Over 60% of the resident actively participate in the treatment program.

Clinical services at the facility are provided through a long-term service contract with Liberty Healthcare Corporation. Liberty employs over thirty experienced Psychologists, Social Workers, Mental Health Counselors, Psychiatrists, Substance Abuse Counselors, Recreation Therapists, and Activity Leaders. The State of Illinois employs a full complement of security and paraprofessional staff to secure the facility and ensure the safety of the facility's staff and residents.

Residents who are discharged from the facility into the community are served by Liberty's *Community Conditional Release Program*. This community-based program employs aggressive case management, GPS monitoring, regular polygraph examinations and drug & alcohol screening, and ongoing outpatient assessment and treatment services.

# **CLINICAL THERAPIST**

## **POSITION DESCRIPTION**

**Reports To and Evaluated By:** Team Leader

### **Overview**

Provides sex offender specific and related treatment services to civilly committed and detained residents of the Treatment and Detention Facility, utilizing cognitive-behavioral methods. Primary modality for service delivery is group therapy, however individual therapy or individual contact with residents is also utilized. Responsible for directing and facilitating assessment-based individualized treatment for assigned residents as a member of the multi-disciplinary treatment team.

### **Duties and Responsibilities**

- 1) Comply with all laws, policies and procedures, rules and regulations formulated by the State of Illinois Department of Human Services (DHS) and Liberty Health Care (Liberty), and any applicable professional governing bodies.
- 2) Deliver cognitive-behavioral treatment, psycho-education and other treatment to individuals and groups as assigned, in accordance with established performance standards. Document service delivery and resident progress on a weekly basis, completed in accordance with established standards and time frames.
- 3) Serve as primary therapist to assigned residents, with frequency and amount of direct contact with residents consistent with established performance standards. Primary therapy duties include: (a) reviewing and integrating assessment information to write and monitor individualized treatment plans; (b) coordinating referral of residents to appropriate treatment groups and activities; (c) referring clients to psychiatric services and encourage residents to seek medical services or other specialized care as needed; (d) meeting weekly with assigned residents to monitor and review ongoing treatment or other needs; (e) reviewing and revising, as needed, resident individualized treatment plans using established format on a quarterly basis; (f) evaluating clinical appropriateness of property and visitation requests; (g) documenting all individual resident contacts using established formats within established time frames; and (h) other duties related to primary care of assigned residents as directed.
- 4) Provide training and consultation to treatment and security staff on clinical methods and procedures related to the Sexually Violent Persons population as directed.
- 5) Administer tests and assessments within scope of licensure, certification and training, as assigned.
- 6) Attend and actively participate in staff meetings, case conferences, case presentations, staff development meetings and training activities.
- 7) Provide clinical support and back up to other clinical staff as needed.
- 8) Works cooperatively in weekly individual supervision with Team Leader for clinical and administrative supervision.

### ***Clinical Therapist job description - continued***

- 9) Perform administrative duties including documentation of work hours, correspondence and coordination with other clinical and facility staff, etc.
- 10) Other duties as assigned.

### **Knowledge and Skills**

- 1) Prior clinical experience working with sexual offenders and an understanding of the dynamics of sexual deviance strongly preferred.
- 2) Familiarity with relevant research literature, clinical assessments, procedures and methods, particularly those designed for sexual offenders.
- 3) Ability to assess treatment goals and write goal-directed, individualized treatment plans, as well as the ability to monitor and document individual behavior patterns and modify treatment plans to meet changing treatment goals.
- 4) Ability to instruct others in the implementation of therapeutic and behavioral interventions and procedures.
- 5) Excellent listening and verbal communication skills.
- 6) Familiarity with the diagnostic nomenclature outlined in the Diagnostic and Statistical Manual, 4<sup>th</sup> Edition (or most recent updated edition).
- 7) Demonstrated interpersonal skills and the ability to establish rapport and maintain objectivity with a criminal or forensic population.
- 8) Appreciation of the need for and ability to maintain appropriate personal boundaries in working with sexual offender populations.
- 9) Investment in expanding current skills/knowledge and to the transfer of this knowledge to other staff.
- 10) Ability to form and maintain good working relationships with a diverse staff and a commitment to enhancing cultural competency.

### **Education/Licensure**

- 1) Masters or Doctoral degree in psychology, social work, counseling.
- 2) Licensed or license-eligible in Illinois as a Clinical Psychologist (LCP), Clinical Professional Counselor (LCPC), or Clinical Social Worker (LCSW). Individuals who are licensed or licensed-eligible as a Licensed Social Worker (LSW), or Licensed Professional Counselor (LPC) may also be considered for hire but must obtain licensure as an LCSW or LCPC, respectively, within a reasonable amount of time from either date of hire or date of licensure (whichever is earlier).

# **TEAM LEADER**

## **POSITION DESCRIPTION**

**Supervises:** Members assigned to team including Clinical Therapists,

**Reports to/Evaluated by:** Associate Clinical Director

**Summary:** Supervises clinical staff members of varying disciplines as leader of a multi-disciplinary treatment team. Ensures quality care is delivered in the treatment of sexual offending to residents of the Treatment and Detention Facility. Functions as a member of the management team to foster program development and the creation and implementation of treatment-related policies and procedures.

### **Duties and Responsibilities:**

- 1) Comply with all laws, policies and procedures, rules and regulations formulated by the State of Illinois Department of Human Services (DHS) and Liberty Healthcare (Liberty), and any applicable professional governing bodies.
- 2) Provide support, direction, clinical and administrative supervision to treatment staff under their direction. Assigns or delegates other duties as necessary.
- 3) Perform Mental Status Evaluations on new admissions assigned to their team within 24 hours of resident's arrival.
- 4) Administer psychological testing (e.g., Rorschach) and writes integrative psychological reports for residents as assigned (Licensed Psychologist), or performs comparable assessments/evaluations within scope of professional licensure (LCSW).
- 5) Lead quarterly staffings on residents assigned to their team.
- 6) Deliver cognitive-behavioral treatment and psychoeducation to individuals and groups as assigned. Documentation of service delivery and resident progress on a weekly basis, in accordance with established standards and time frames.
- 7) Serve as member of the Behavior Committee for residents assigned to their team, and for residents assigned to other teams as directed.
- 8) Ensure that staff under their direction are familiar with clinical and operating policies and procedures and informed on policy updates and revisions.
- 9) Ensure that programmatic duties and responsibilities are being met by team members.
- 10) Responsible for ensuring quality assurance of resident clinical files.
- 11) Meet regularly with Associate Clinical Director for supervision to provide updates and summaries of clinical operations for their team.
- 12) Assume leadership role when appropriate at all-staff meetings, case conferences and training activities.

- 13) Provide court testimony as necessary regarding resident participation in and response to the treatment program.
- 14) Work collaboratively with DHS unit management and security staff.
- 15) Participate and contribute at a management level in Team meetings and executive staff meetings.
- 16) Provide back up administrative functions as assigned and for other clinical staff as needed.
- 17) Contribute to program development, creation of policies and procedures, and other areas of administrative development of the treatment program.
- 18) Other duties as assigned.

### **Knowledge and Skills**

- 1) Minimum of two years experience providing sex offender specific treatment or other, related clinical services in a correctional or forensic setting.
- 2) Previous supervisory experience in a mental health setting, or clearly demonstrated leadership and organizational skills.
- 3) Superb clinical observation skills.
- 4) Excellent interpersonal skills and demonstrated ability to build rapport with a wide range of personalities.
- 5) Appreciation of the need for and ability to maintain appropriate personal boundaries in working with sexual offender populations.
- 6) Ability to form and maintain good working relationships with a diverse staff and a commitment to enhancing cultural competency.

### **Education/Licensure**

- 1) Doctoral Degree in Clinical or Counseling Psychology or related field, licensed/ licensed-eligible as a Clinical Psychologist in Illinois, or Masters Degree in Social Work, licensed/ licensed-eligible as a Clinical Social Worker (LCSW).



**Downtown Springfield, Illinois  
(Illinois State Capital)**



**A view of Quincy, Illinois and the Mississippi river**



**Western Illinois University – Macomb, Illinois**



# Illinois Department of Human Services Treatment & Detention Center

## Rushville, IL



Larger towns within commuting distance of Rushville, Illinois

- Macomb – 30 minute drive
- Springfield – 60 minute drive
- Quincy – 60 minute drive

Major cities in the region, with driving distances from Springfield, IL:

- St. Louis, MO – 2.5 hours
  - Chicago, IL – 3 hours
  - Quad Cities, IL & IA – 3 hours
  - Indianapolis, IN – 3.5 hours
  - Louisville, KY – 5 hours
  - Des Moines, IA – 5 hours
- regular non-stop flights & train service  
regular non-stop flights & train service



## Useful websites

**Liberty Healthcare** <http://www.libertyhealthcare.com/>

**Illinois Department of Human Services** <http://www.dhs.state.il.us/>

### Illinois Department of Professional Regulation

Psychology licensure <http://www.idfpr.com/profs/info/psych.asp>

Social Work licensure <http://www.idfpr.com/profs/info/SocialWorker.asp>

Counseling licensure <http://www.idfpr.com/PROFS/Info/ProfCounselor.asp>

### Housing information - national listings

Rental properties / listings by city <http://www.rent.com>

<http://www.apartments.com>

Homes for sale / listings by city <http://www.realtor.com>

Relocation information  
& cost of living calculator <http://www.homefair.com>

### Springfield, Illinois

General information <http://www.uis.edu/about/springfield.html>

<http://www.visit-springfieldillinois.com/>

Area guide w/link to rentals (link to rental properties)

Chatham Hills Apartments <http://www.chathamhillsapts.com>

Huntington Ridge Apartments <http://www.huntington-ridge.com/>

Madison Park Townhomes <http://www.youtube.com/watch?v=wRYa2JzSn70>

Olde Town Apartments <http://www.youtube.com/watch?v=APgaDEOfGv4>

Craigslist – Springfield <http://springfieldil.craigslist.org/>

Springfield airport <http://www.flyspi.com/>

Amtrak train service <http://www.amtrak.com>

Journal Register newspaper  
(link to rental properties) <http://www.sj-r.com/>

Springfield public schools <http://www.springfield.k12.il.us/>

White Oaks Mall / shopping <http://www.simon.com/mall/default.aspx?ID=180>

### **Quincy, Illinois**

General information <http://www.quincy-cvb.org/>

Local TV station / news <http://www.wgem.com/>

Herald Whig newspaper <http://www.qps.org/index.html>

Quincy public schools <http://www.qps.org/index.html>

Quincy mall / shopping <http://www.atquincymall.com/>

Craigslist – Quincy <http://quincy.craigslist.org/>

### **Macomb, Illinois**

General information  
(news, relocation info, etc.) <http://www.macomb.com/>

<http://www.makeitmacomb.com/>

Western Illinois University <http://www.wiu.edu/>

Macomb Daily newspaper <http://www.macombdaily.com/>

Apartments & rentals in Macomb: Southern Hill Apartments  
1007 W. Grant Street  
(309) 837-2143

Stratford West Townhouses  
10 Rye Court  
(309) 837-1689

Triad Square  
104 N. Ward Street  
(309) 833-2320

Turnberry Village Apartments  
101 Wigwam Hollow Circle  
(309) 836-6342

Liberty Healthcare Corporation was founded in 1976 by Herbert T. Caskey, M.D.

Since the company's inception, Liberty has been providing clinical consulting, staffing and management services to health care facilities nationwide.

Our mission is to be a progressive developer and manager of quality, consumer-oriented treatment delivery systems. We strive to achieve this goal through:

- Forming collaborative partnerships with our clients
- Customizing programs to meet the unique needs of our client's health care consumers
- Managing programs with a consumer focus
- Recruiting and retaining skilled, dedicated, and compassionate personnel
- Supporting our personnel
- Committing to continuous quality improvement

Our clients range from state governmental departments and agencies to *Fortune 500* companies. We are recognized for our specialized:

- Behavioral health services for people with forensic issues
- Psychiatric care for people with acute and chronic mental illness
- Medical and habilitative services for the geriatric population and people with developmental disabilities
- Primary care and occupational health care services for employees of large industrial companies

Liberty Healthcare is a privately-held organization, which is lead by Dr. Caskey and a management team which is largely comprised of clinicians. Based in suburban Philadelphia – our corporate office supports one thousand employees, among forty clinical programs, throughout twenty states.

We're an organization comprised of dedicated psychologists, counselors, social workers, therapists, nurses, physicians, direct care workers, and administrative support staff. Many of our employees are recognized nationally as leaders in their respective fields. Many serve as surveyors for accrediting agencies such as HCFA and JCAHO, and are published in widely circulated clinical journals and periodicals.

- Liberty Healthcare is an equal opportunity employer -



401 East City Avenue, Suite 820  
Bala Cynwyd, Pennsylvania 19004  
(800) 331-7122

[www.libertyhealthcare.com](http://www.libertyhealthcare.com)

# Liberty Healthcare Corporation and its Affiliates

## Our Vision

is to be the premier developer and manager of customized, highest-quality treatment delivery systems for the public and private sectors in facility and community settings.

## Our Mission

is to provide healthcare management solutions of the highest quality in both the public and private sectors that are consumer-focused, cost-effective, gainful and outcomes-oriented. Liberty is dedicated to ongoing enhancement of our existing methodologies for delivering quality treatment services, while retaining our entrepreneurial capacity to rapidly create new services to meet emerging opportunities in the market place.

## Our Core Values: “S-E-R-V-I-C-E”

**Staff:** Liberty values its staff. We recognize that the greatest resource of any program is highly skilled staff who are dedicated to the persons and programs they serve. We recruit and retain the best possible people and support them with the best technology and resources to do their jobs.

**Entrepreneurial:** Liberty is a creative “can do” company that specializes in developing health care solutions for the most complex and challenging situations and populations.

**Responsiveness:** Although Liberty manages many programs in many regions, we believe that health care delivery must be local and personalized. We empower our local program directors, while ensuring easy access to corporate managers with the clinical and administrative authority to make vital decisions promptly.

**Value-Added:** Liberty offers depth and diversity of resources in support of our contracts, such as clinical programming, specialist consultations, training, personnel management, information and reporting systems, program accreditation, recruiting and credentialing, and quality management.

**Independence:** Liberty is not a part of any network, managed care organization, hospital chain or insurance plan. Our sole obligation is to serve the goals of our customers by devising and delivering high quality care to each individual. Our healthcare professionals are compensated to eliminate any incentives to deny needed services or add unnecessary ones.

**Collaboration:** Liberty forms a close, collaborative partnership with each customer. Instead of trying to make the client fit our goals, we customize our resources to achieve the goals of the client.

**Effectiveness:** Liberty is accountable for getting results. The quality and cost-effectiveness of every aspect of our contracted program services is critical. We are committed to the principle of measurable excellence and supporting all our programs with state-of-the-art Quality Improvement programming.



BENEFITS INFORMATION  
For Liberty Healthcare employees  
at the Treatment & Detention  
facility in Rushville, IL

401 E. City Avenue, Suite 820  
Bala Cynwyd, PA 19004  
800-331-7122  
[www.libertyhealthcare.com](http://www.libertyhealthcare.com)

## Paid Time Off

Liberty offers 240 hours (equivalent to thirty 8-hour days) of cumulative paid time annually. This includes vacation, holiday, sick and personal time. Employees begin accruing paid time off immediately upon the commencement of employment, and may use their time as soon as it is accrued.

## Payday

Employees are paid bi-weekly by direct deposit, every other Friday, a total of 26 times per year.

## Section 125

Liberty offers a Section 125 premium conversion plan to its employees. Any employee contributions towards benefits are taken from pre-tax income.

## Health Insurance

Liberty employees receive health insurance through **Aetna**.

This is a Preferred Provider Organization (PPO) with a prescription plan.

The plan's provider network and other information may be found online at [www.Aetna.com](http://www.Aetna.com).

Employees are eligible for health insurance approximately 90 days from the commencement of employment.

Liberty employees who elect to receive health insurance through the company are required to contribute \$63.27 per pay period toward the cost of the premium. Employees may also elect to purchase health insurance for their dependents through Liberty Healthcare. Please consult with a human resources representative at Liberty regarding the rates for dependent health insurance.

## Open Enrollment

Employees may add benefits during the open enrollment period which occurs each May.

## Disability Insurance

Disability insurance enables you to receive income if you become disabled in a non-work-related accident or injury. A human resources representative can provide you with details regarding disability coverage.

## Life Insurance

A life insurance policy is purchased for each full time employee. In the event of the employee's death, their beneficiary would receive a one time payment of the employee's annual salary to a maximum of \$50,000.00. Employees also have the option of purchasing supplemental life insurance through *Unum Provident*.

## Dental Insurance

A voluntary dental plan is offered through MetLife. To find a participating dentist visit [www.MetLife.com](http://www.MetLife.com).

### Biweekly payroll deductions:

Employee only	\$14.20
Employee & one dependent	\$26.92
Employee & full family	\$42.40

Employees are eligible for dental and vision insurance approximately 60 days from the commencement of employment.

## Vision Plan

Liberty's vision plan is VSP. Most exams, frames & contact lenses are covered in-full. Details may be found online at [www.vsp.com](http://www.vsp.com).

### Biweekly payroll deductions:

Employee only	\$6.89
Employee & one dependent	\$11.03
Employee & full family	\$18.15

## 401 (k)

Liberty employees may participate in the 401(k) plan ninety days from the commencement of employment.

The 401(k) plan is administered by Fidelity. To learn more about the wide variety of investment options offered, please visit [www.401k.com](http://www.401k.com).

A representative is available to assist you with your financial planning. Liberty does not offer a match.

**Bi-weekly payroll deductions  
every other week / 26 times per year**

	<b>Health insurance</b>	<b>Dental insurance</b>	<b>Vision insurance</b>	<b>Long-term disability insurance</b>	<b>Basic life insurance</b>
Employee only	63.27	\$14.20	\$6.89	no cost	no cost
Employee + one child	210.29	\$26.92	\$11.03	n/a	n/a
Employee + two or more children	210.29	\$42.40	\$11.26	n/a	n/a
Employee + spouse	290.80	\$26.92	\$11.03	n/a	n/a
Family (employee + spouse + one or more children)	371.27	\$42.40	\$18.15	n/a	n/a

<b>Benefit</b>	<b>Wait period for benefit (from 1st of month following start date)</b>
Long term disability	60 days
Short term disability	next open enrollment
Basic Life insurance	60 days
Whole life insurance	next open enrollment
Dental insurance	60 days
Vision insurance	60 days
Health insurance	90 days
401 k	90 days



**PLAN DESIGN & BENEFITS  
 PROVIDED BY AETNA LIFE INSURANCE COMPANY**

<b>PLAN FEATURES</b>	<b>PREFERRED CARE</b>	<b>NON-PREFERRED CARE</b>
<b>Deductible</b> (per calendar year)	None Individual None Family	\$1,500 Individual \$4,500 Family
Unless otherwise indicated, the Deductible must be met prior to benefits being payable. Once Family Deductible is met, all family members will be considered as having met their Deductible for the remainder of the calendar year.		
<b>Member Coinsurance</b>	Covered 100%	50%
Applies to all expenses unless otherwise stated.		
<b>Payment Limit</b> (per calendar year)	None Individual None Family	\$10,000 Individual \$30,000 Family
Certain member cost sharing elements may not apply toward the Payment Limit.		
<b>Lifetime Maximum</b>	Unlimited except where otherwise indicated.	
<b>Payment for Non-Preferred</b>	Not Applicable	Professional: 105% of Medicare Facility: 140% of Medicare
<b>Primary Care Physician Selection</b>	Not Applicable	Not Applicable
<b>Certification Requirements -</b> Certification for certain types of Non-Preferred care must be obtained to avoid a reduction in benefits paid for that care. Certification for Hospital Admissions, Treatment Facility Admissions, Convalescent Facility Admissions, Home Health Care, Hospice Care and Private Duty Nursing is required - excluded amount applied separately to each type of expense is \$400 per occurrence.		
<b>Referral Requirement</b>	None	None
<b>PREVENTIVE CARE</b>	<b>PREFERRED CARE</b>	<b>NON-PREFERRED CARE</b>
<b>Routine Adult Physical Exams/ Immunizations</b>	Covered 100%	50%; after deductible
1 exam every 12 months for members age 18 and older.		
<b>Routine Well Child Exams/Immunizations</b>	Covered 100%	50%; after deductible
7 exams in the first 12 months of life, 3 exams in the second 12 months of life, 3 exams in the third 12 months of life, 1 exam per year thereafter to age 18.		
<b>Routine Gynecological Care Exams</b>	Covered 100%	50%; after deductible
Includes routine tests and related lab fees.		
<b>Routine Mammograms</b>	Covered 100%	50%; after deductible
<b>Routine Digital Rectal Exam</b>	Covered 100%	Member cost sharing is based on the type of service performed and the place of service where it is rendered; after deductible
<b>Prostate-specific Antigen Test</b>	Covered 100%	Member cost sharing is based on the type of service performed and the place of service where it is rendered; after deductible
<b>Colorectal Cancer Screening</b>	Member cost sharing is based on the type of service performed and the place of service where it is rendered.	Member cost sharing is based on the type of service performed and the place of service where it is rendered; after deductible
For all members age 50 and over.		
<b>Routine Eye Exams</b>	\$40 office visit copay	50%; after deductible
1 routine exam per 24 months.		
<b>Routine Hearing Exams</b>	Not Covered	Not Covered
<b>PHYSICIAN SERVICES</b>	<b>PREFERRED CARE</b>	<b>NON-PREFERRED CARE</b>
<b>Office Visits to non-Specialist</b>	\$20 office visit copay	50%; after deductible
Includes services of an internist, general physician, family practitioner or pediatrician.		





**PLAN DESIGN & BENEFITS  
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<b>Specialist Office Visits</b>	\$40 office visit copay	50%; after deductible
<b>E-visit to non-Specialist</b>	\$20 office visit copay	50%; after deductible
An E-visit is an online internet consultation between a physician and an established patient about a non-emergency healthcare matter. This visit must be conducted through an Aetna authorized internet E-visit service vendor.		
<b>E-visit to Specialist</b>	\$30 office visit copay	50%; after deductible
An E-visit is an online internet consultation between a physician and an established patient about a non-emergency healthcare matter. This visit must be conducted through an Aetna authorized internet E-visit service vendor.		
<b>Walk-in Clinics</b>	\$20 office visit copay	50%; after deductible
Walk-in Clinics are network, free-standing health care facilities. They are an alternative to a physician's office visit for treatment of unscheduled, non-emergency illnesses and injuries and the administration of certain immunizations. It is not an alternative for emergency room services or the ongoing care provided by a physician. Neither an emergency room, nor the outpatient department of a hospital, shall be considered a Walk-in Clinic.		
<b>Allergy Testing</b>	Member cost sharing is based on the type of service performed and the place of service where it is rendered.	Member cost sharing is based on the type of service performed and the place of service where it is rendered.
<b>Allergy Injections</b>	Member cost sharing is based on the type of service performed and the place of service where it is rendered.	Member cost sharing is based on the type of service performed and the place of service where it is rendered.
<b>DIAGNOSTIC PROCEDURES</b>		
	<b>PREFERRED CARE</b>	<b>NON-PREFERRED CARE</b>
<b>Diagnostic Laboratory and X-ray</b> (other than Complex Imaging Services)	Covered 100%	50%; after deductible
If performed as a part of a physician office visit and billed by the physician, expenses are covered subject to the applicable physician's office visit member cost sharing.		
<b>Diagnostic Outpatient Complex Imaging</b>	\$50 copay	50%; after deductible
<b>EMERGENCY MEDICAL CARE</b>		
	<b>PREFERRED CARE</b>	<b>NON-PREFERRED CARE</b>
<b>Emergency Room</b>	\$100 copay	Same as preferred care.
<b>Non-Emergency Care in an Emergency Room</b>	Not Covered	Not Covered
<b>Emergency Use of Ambulance</b>	Covered 100%	Covered 100%
<b>Non-Emergency Use of Ambulance</b>	Not Covered	Not Covered
<b>HOSPITAL CARE</b>		
	<b>PREFERRED CARE</b>	<b>NON-PREFERRED CARE</b>
<b>Inpatient Coverage</b>	\$250 per admission copay	50%; after deductible
The member cost sharing applies to all covered benefits incurred during a member's inpatient stay.		
<b>Inpatient Maternity Coverage</b>	\$250 per admission copay	50%; after deductible
The member cost sharing applies to all covered benefits incurred during a member's inpatient stay.		
<b>Outpatient Hospital Expenses</b> (including surgery)	Covered 100%	50%; after deductible
The member cost sharing applies to all covered benefits incurred during a member's outpatient visit.		
<b>MENTAL HEALTH SERVICES</b>		
	<b>PREFERRED CARE</b>	<b>NON-PREFERRED CARE</b>
<b>Inpatient</b>	\$250 per admission copay	50% per admission; after deductible
The member cost sharing applies to all covered benefits incurred during a member's inpatient stay.		
<b>Outpatient</b>	\$40 copay per visit	50% per visit; after deductible
Additional outpatient visits may be provided. Each day of inpatient benefits may be converted into two additional outpatient visits.		
The member cost sharing applies to all covered benefits incurred during a member's outpatient visit.		
All Mental Health and Alcohol/Drug day and visit limits are combined.		
<b>ALCOHOL/DRUG ABUSE SERVICES</b>		
	<b>PREFERRED CARE</b>	<b>NON-PREFERRED CARE</b>
<b>Inpatient</b>	\$250 per admission copay	50% per admission; after deductible
The member cost sharing applies to all covered benefits incurred during a member's inpatient stay.		
<b>Residential Treatment Facility</b>	\$250 copay per admission	50% per admission; after deductible



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<b>Outpatient</b>	\$40 copay per visit	50% per visit; after deductible
The member cost sharing applies to all covered benefits incurred during a member's outpatient visit. All Mental Health and Alcohol/Drug day and visit limits are combined.		
<b>OTHER SERVICES</b>	<b>PREFERRED CARE</b>	<b>NON-PREFERRED CARE</b>
<b>Convalescent Facility</b>	\$100 per admission copay	50% per admission; after deductible
Limited to 120 days per calendar year. The member cost sharing applies to all covered benefits incurred during a member's inpatient stay.		
<b>Home Health Care</b>	Covered 100% per visit	50% per visit; after deductible
Each visit by a nurse or therapist is one visit. Each visit up to 4 hours by a home health care aide is one visit.		
<b>Hospice Care - Inpatient</b>	Covered 100% per admission	50% per admission; after deductible
The member cost sharing applies to all covered benefits incurred during a member's inpatient stay.		
<b>Hospice Care - Outpatient</b>	Covered 100% per visit	50% per visit; after deductible
The member cost sharing applies to all covered benefits incurred during a member's outpatient visit.		
<b>Private Duty Nursing - Outpatient</b>	Not Covered	Not Covered
<b>Treatment of Autism</b>	Member cost sharing is based on the type of service performed and the place of service where it is rendered.	Member cost sharing is based on the type of service performed and the place of service where it is rendered.
Covered the same as any other expense. Limited to \$36,000 annually for eligible individuals under 21 years of age. Includes coverage for habilitative care and Applied Behavioral Analysis. Once the limit has been met, Applied Behavioral Analysis will be covered under Mental Health services.		
<b>Outpatient Speech Therapy</b>	\$40 copay per visit	50% per visit; after deductible
Limited to 20 visits per calendar year.		
<b>Outpatient Physical and Occupational Therapy</b>	\$40 copay per visit	50% per visit; after deductible
Limited to 30 visits per calendar year combined.		
<b>Spinal Manipulation Therapy</b>	\$40 copay per visit	50% per visit; after deductible
Limited to 20 visits per calendar year.		
<b>Durable Medical Equipment</b>	50%	50%; after deductible
<b>Diabetic Supplies -- (if not covered under Pharmacy benefit)</b>	Covered same as any other medical expense.	Covered same as any other medical expense.
<b>Contraceptive drugs and devices not obtainable at a pharmacy (includes coverage for contraceptive visits)</b>	Covered same as any other medical expense.	Covered same as any other medical expense.
<b>Vision Eyewear</b>	Covered 100% up to \$100 every 24 months	Same as preferred care
<b>Transplants</b>	\$250 copay Preferred coverage is provided at an IOE contracted facility only.	50%; after deductible Non-Preferred coverage is provided at a Non-IOE facility.
<b>Bariatric Surgery</b>	Not Covered	Not Covered
The member cost sharing applies to all covered benefits incurred during a member's inpatient stay.		
<b>"Other" Health Care -- 20% member coinsurance after the preferred (per calendar year) deductible for services that are neither "preferred" nor "non-preferred".</b>		
<b>FAMILY PLANNING</b>	<b>PREFERRED CARE</b>	<b>NON-PREFERRED CARE</b>
<b>Infertility Treatment</b>	Member cost sharing is based on the type of service performed and the place of service where it is rendered.	Member cost sharing is based on the type of service performed and the place of service where it is rendered; after deductible

Diagnosis and treatment of the underlying medical condition.



**PLAN DESIGN & BENEFITS  
 PROVIDED BY AETNA LIFE INSURANCE COMPANY**

<b>Comprehensive Infertility Services</b>	Not Covered	Not Covered
<b>Advanced Reproductive Technology (ART)</b>	Not Covered	Not Covered
<b>Voluntary Sterilization</b>	Member cost sharing is based on the type of service performed and the place of service where it is rendered.; after deductible	Member cost sharing is based on the type of service performed and the place of service where it is rendered.

Including tubal ligation and vasectomy.

<b>PHARMACY</b>	<b>PREFERRED CARE</b>	<b>NON-PREFERRED CARE</b>
<b>Retail</b>	\$20 copay for generic drugs, \$40 copay for formulary brand-name drugs, and \$70 copay for non-formulary brand-name drugs up to a 30 day supply at participating pharmacies.	Not Covered
<b>Mail Order</b>	\$40 copay for generic drugs, \$80 copay for formulary brand-name drugs, and \$140 copay for non-formulary brand-name drugs up to a 31-90 day supply from Aetna Rx Home Delivery®.	Not Applicable

**Aetna Specialty CareRx**  
 First prescription fill at any retail drug facility. Subsequent fills must be through Aetna Specialty Pharmacy®  
**No Mandatory Generic (NO MG)** - Member is responsible to pay the applicable copay only.  
**Plan Includes:** Diabetic supplies and Contraceptive drugs and devices obtainable from a pharmacy.  
 Oral and injectable fertility drugs included (physician charges for injections are not covered under RX, medical coverage is limited).  
 Precert for growth hormones included. Expanded Precert included.  
 Step Therapy included

<b>GENERAL PROVISIONS</b>	
<b>Dependents Eligibility</b>	Spouse, children from birth to age 26.
<b>Pre-existing Conditions Exclusion</b>	On effective date: Waived After effective date: Full postponement

For members age 19 or over this plan imposes a pre-existing condition exclusion, which may be waived in some circumstances and may not be applicable to you. A pre-existing condition exclusion means that if you have a medical condition before coming to this plan, you may have to wait a certain period of time before the plan will provide coverage for that condition. This exclusion applies only to conditions for which medical advice, diagnosis, care, or treatment was recommended or received or for which the individual took prescribed drugs within 90 days. Generally, this period ends the day before your coverage becomes effective. However, if you were in a waiting period for coverage, 90 days ends on the day before the waiting period begins. The exclusion period, if applicable, may last up to 365 days from your first day of coverage, or, if you were in a waiting period, from the first day of your waiting period. If you had prior creditable coverage within 90 days immediately before the date you enrolled under this plan, then the pre-existing conditions exclusion in your plan, if any, will be waived.



**PLAN DESIGN & BENEFITS  
PROVIDED BY AETNA LIFE INSURANCE COMPANY**

If you had no prior creditable coverage within the 90 days prior to your enrollment date (either because you had no prior coverage or because there was more than a 90 day gap from the date your prior coverage terminated to your enrollment date), we will apply your plan's pre-existing conditions exclusion. In order to reduce or possibly eliminate your exclusion period based on your creditable coverage, you should provide us a copy of any certificates of creditable coverage you have. Please contact Aetna Member Services at 1-888-982-3862 if you need assistance in obtaining a certificate of creditable coverage from your prior carrier or if you have any questions on the information noted above. The pre-existing condition exclusion does not apply to pregnancy nor to a child who is enrolled in the plan within 31 days of birth, adoption, or placement for adoption. Note: For late enrollees, coverage will be delayed until the plan's next open enrollment, and the pre-existing condition exclusion will be applied from the individual's effective date of coverage.

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**\*Members may choose providers in our network (physicians and facilities) or may visit an out-of-network provider. Typically, members will pay substantially more money out of their own pocket if they choose to use an out-of-network doctor. The out-of-network provider will be paid based on Aetna's "recognized charge." This is not the same as the billed charge from the doctor.**

Aetna pays a percentage of the recognized charge, as defined in the member's plan. The member may have to pay the difference between the out-of-network provider's billed charge and Aetna's recognized charge, plus any coinsurance and deductibles due under the plan. Note that any amount the doctor bills the member above Aetna's recognized charge does not count toward the member's deductible or out-of-pocket maximums.

For out-of-network physicians and other out-of-network providers, the recognized charge is based on the Aetna Market Fee Schedule, which are the standard rates for paying providers within the network. For out-of-network hospitals and other out-of-network facilities, Aetna pays a percentage as defined in the member's plan of the reasonable and customary charge as determined by Aetna. The member may have to pay the difference between the out-of-network facility's bill and the amount that Aetna pays, plus any coinsurance and deductibles due under the plan.

This benefit applies when members choose to get care out of network. When members have no choice in the doctors they see (for example, an emergency room visit after a car accident), they are generally not responsible for the extra out-of-network costs.

Plans are provided by: Aetna Life Insurance Company. While this material is believed to be accurate as of the production date, it is subject to change.

Health benefits and health insurance plans contain exclusions and limitations. Not all health services are covered.

See plan documents for a complete description of benefits, exclusions, limitations and conditions of coverage. Plan features and availability may vary by location and are subject to change. You may be responsible for the health care provider's full charges for any non-covered services, including circumstances where you have exceeded a benefit limit contained in the plan. Providers are independent contractors and are not agents of Aetna. Provider participation may change without notice. Aetna does not provide care or guarantee access to health services.

The following is a list of services and supplies that are generally *not covered*. However, your plan documents may contain exceptions to this list based on state mandates or the plan design or rider(s) purchased by your employer.



**PLAN DESIGN & BENEFITS  
PROVIDED BY AETNA LIFE INSURANCE COMPANY**

- All medical and hospital services not specifically covered in, or which are limited or excluded by your plan documents.
- Cosmetic surgery, including breast reduction.
- Custodial care.
- Dental care and dental X-rays.
- Donor egg retrieval.
- Durable medical Equipment
- Experimental and investigational procedures, except for coverage for medically necessary routine patient care costs for members participating in a cancer clinical trial.
- Hearing aids
- Home births
- Immunizations for travel or work, except where medically necessary or indicated.
- Implantable drugs and certain injectable drugs including injectable infertility drugs.
- Infertility services, including artificial insemination and advanced reproductive technologies such as IVF, ZIFT, GIFT, ICSI and other related services, unless specifically listed as covered in your plan documents.
- Long-term rehabilitation therapy.
- Non-medically necessary services or supplies.
- Orthotics except diabetic orthotics.
- Outpatient prescription drugs (except for treatment of diabetes), unless covered by a prescription plan rider and over-the-counter medications (except as provided in a hospital) and supplies.
- Radial keratotomy or related procedures.
- Reversal of sterilization.
- Services for the treatment of sexual dysfunction or inadequacies, including therapy, supplies or counseling or prescription drugs.
- Special duty nursing.
- Therapy or rehabilitation other than those listed as covered.
- Treatment of behavioral disorders.
- Weight control services including surgical procedures, medical treatments, weight control/loss programs, dietary regimens and supplements, appetite suppressants and other medications; food or food supplements, exercise programs, exercise or other equipment; and other services and supplies that are primarily intended to control weight or treat obesity, including Morbid Obesity, or for the purpose of weight reduction, regardless of the existence of comorbid conditions.

Aetna receives rebates from drug manufacturers that may be taken into account in determining Aetna's Preferred Drug List. Rebates do not reduce the amount a member pays the pharmacy for covered prescriptions. Aetna Rx Home Delivery refers to Aetna Rx Home Delivery, LLC, a licensed pharmacy subsidiary of Aetna Inc., that operates through mail order. The charges that Aetna negotiates with Aetna Rx Home Delivery may be higher than the cost they pay for the drugs and the cost of the mail order pharmacy services they provide. For these purposes, the pharmacy's cost of purchasing drugs takes into account discounts, credits and other amounts that they may receive from wholesalers, manufacturers, suppliers and distributors.

In case of emergency, call 911 or your local emergency hotline, or go directly to an emergency care facility.

**This managed care plan may not cover all of your health care expenses. Read your contract carefully to determine which health care services are covered. To contact the plan if you are a member, call the number on your ID card; all others, call 1-888-98-AETNA (1-888-982-3862).**

Translation of the material into another language may be available. Please call Member Services at 1-888-98-AETNA (1-888-982-3862).

Puede estar disponible la traducción de este material en otro idioma. Por favor llame a Servicios al Miembro al 1-888-98-AETNA (1-888-982-3862).

Plan features and availability may vary by location and group size.

For more information about Aetna plans, refer to [www.aetna.com](http://www.aetna.com).  
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# Your vision. Our passion.



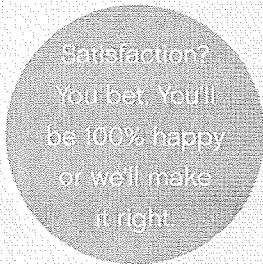
## Where will your eyes take you today?

Whether it's a day in the life or a day to remember, you'll get the personalized eyecare you deserve with VSP. We help millions of people see well, stay healthy and fulfill their potential.

## Value, choice, doctors.

Enrolling in VSP is an easy way to make your life a little better. Here's a snapshot of what you'll enjoy:

- affordable benefits with great savings
- a WellVision Exam<sup>SM</sup> focused on your health
- plenty of eyewear choices you'll love
- VSP doctors nearby with flexible schedules that work for you



## Still not decided?

Find doctors in your neighborhood at [vsp.com](http://vsp.com) or call us at 800-877-7195. We'd love to talk with you. Once you're signed up, your great benefits are a snap to use.

Enroll today. You'll be glad you did.



LIBERTY HEALTHCARE CORPORATION and VSP provide you an affordable eyecare plan. Sign up today.

### Your Coverage from a VSP Doctor

**\$10.00 copay every plan year<sup>1</sup>**

**WellVision Exam<sup>®</sup>** focuses on your eye health and overall wellness..... **every 12 months**

#### Prescription Glasses

**Lenses..... every 12 months**

- Single vision, lined bifocal and lined trifocal lenses.
- Polycarbonate lenses for dependent children.

**Frame..... every 12 months**

- \$130 allowance for frame of your choice.
- 20% off amount over your allowance

~OR~

**Contact Lens Care..... every 12 months**

\$130.00 allowance for contacts and the contact lens exam (fitting and evaluation). This additional exam ensures proper fit of contacts.

Current soft contact lens wearers may qualify for a special program that includes a contact lens evaluation and initial supply of replacement lenses.

### Extra Discounts and Savings

#### Glasses and Sunglasses

- Average 30% savings on lens options like progressives and scratch-resistant and anti-reflective coatings
- 20% off additional glasses and sunglasses, including lens options

#### Contacts\*

- 15% off cost of contact lens exam (fitting and evaluation)

#### Laser Vision Correction

- Average 15% off the regular price or 5% off the promotional price. Discounts only available from contracted facilities.
- After surgery, use your frame allowance (if eligible) for sunglasses from any VSP doctor.

\*Available from any VSP doctor within 12 months of your last eye exam

You get the best value from your benefit when you see a VSP doctor. If you see a non-VSP provider, you'll typically pay more out of pocket. You'll pay the provider in full and must submit a claim to VSP for partial reimbursement less copays. Before seeing a non-VSP provider, call us at 800.877.7195.

#### Out-of-Network Reimbursement Amounts:

Exam.....	\$45.00
Single Vision Lenses.....	\$45.00
Lined Bifocal Lenses.....	\$65.00
Lined Trifocal Lenses.....	\$85.00
Frame.....	\$47.00
Contacts.....	\$105.00

VSP guarantees service from VSP doctors only. In the event of a conflict between this information and your organization's contract with VSP, the terms of the contract will prevail.

<sup>1</sup> every 12 months

# Dental Benefits from MetLife

Dental coverage designed for the real world.

**MetLife**<sup>®</sup>



## Plan Design for: Liberty Healthcare

Effective Date: May 1, 2009

### Choice, Service, Savings.

To help you enroll, the following pages outline your company's dental plan and address any questions you may have.

Coverage Type	In-Network <sup>1</sup>	Out-of-Network <sup>1</sup>
Type A – Preventive	100% of PDP Fee <sup>2</sup>	100% of R&C Fee <sup>4</sup>
Type B - Basic Restorative	100% of PDP Fee	80% of R&C Fee
Type C - Major Restorative	60% of PDP Fee	50% of R&C Fee

Deductible	In-Network <sup>3a</sup>	Out-of-Network <sup>3b</sup>
Individual	\$50	\$50
Family	\$150	\$150

Annual Maximum Benefit		
Per Person	\$1,500	\$1,000

<sup>1</sup> "In-Network Benefits" means benefits under this plan for covered dental services that are provided by a MetLife PDP Dentist. "Out-of-Network Benefits" means benefits under this plan for covered dental services that are not provided by a MetLife PDP Dentist.

<sup>2</sup> PDP Fee refers to the fees that MetLife PDP dentists have agreed to accept as payment in full.

<sup>3a</sup> Applies to Type B and C services only.

<sup>3b</sup> Applies to Type B and C services only.

<sup>4</sup> Out-of-network benefits are payable for services rendered by a dentist who is not a participating provider. The Reasonable and Customary charge is based on the lowest of:

- The dentist's actual charge (the 'Actual Charge'),
- The dentist's usual charge for the same or similar services (the 'Usual Charge') or
- The usual charge of most dentists in the same geographic area for the same or similar services as determined by MetLife (the 'Customary Charge'). For your plan, the Customary Charge is based on the 90th percentile. Services must be necessary in terms of generally accepted dental standards.

### An Example of Savings When You Visit a MetLife PDP Dentist

Take a look at an example\* that shows how receiving services from a MetLife PDP dentist can save you money:

**Your Dentist says you need a Crown, Type B Service \***

**PDP Fee: \$375.00 R&C Fee: \$500.00**

**Dentist's Usual Fee: \$550.00**

\* Please note: this example assumes that your annual deductible has been met.

(IN-NETWORK) When you receive care from a MetLife PDP dentist...		(OUT-OF-NETWORK) When you receive care from a Non-Participating dentist...	
The PDP Fee is:	\$375.00	Dentist's Usual Fee is:	\$550.00
Your Plan Pays:		Your Plan Pays:	
(100% x \$375 PDP Fee)	- \$375.00	(80% x \$500 R&C Fee)	- \$400.00
Your Out-of-Pocket Cost:	\$0.00	Your Out-of-Pocket Cost:	\$150.00

**In this example, YOU SAVE \$150.00 (\$150.00 minus \$0.00)...by using a MetLife PDP dentist!**

**Visiting a MetLife PDP Dentist gives you the opportunity to maximize the value of your plan.**

**There is additional information in this overview concerning MetLife PDP dentists.**

*Please note, this is only an example and may not match your plan design.*



## **List of Covered Services & Limitations\***

### **Type A – Preventive**

#### **How Many/How Often**

Topical Fluoride Applications	• 1 fluoride treatment in 12 months for dependent children up to 14th birthday.
Sealants	• 1 sealant per permanent 1st & 2nd non-restored non-decayed molar in lifetime of a dependent child up to 14th birthday.
Prophylaxis (Cleanings)	• 1 cleaning in 6 months.
Oral Examinations	• 1 oral exam in 6 months.
Full Mouth X-rays	• 1 full mouth X-ray in 60 months.
Bitewing X-rays	• Adult - 1 time in 12 months / Child - 1 time in 12 months up to 14th birthday.

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### **Type B – Basic Restorative**

#### **How Many/How Often**

Space Maintainers	• Space Maintainers for dependent children up to 14th birthday.
General Anesthesia	• When dentally necessary in connection with oral surgery, extractions or other covered dental services.
Amalgam and Composite Fillings	• 1 in 24 months.
Crown, Denture and Bridge Repairs	• 1 per 12 Months.
Emergency Palliative Treatment	
Prefabricated Stainless Steel & Resin Crowns	• 1 replacement per 10 years

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### **Type C - Major Restorative**

#### **How Many/How Often**

Implants	• Services: 1 per tooth position in 60 months. Repairs: 1 per 12 Months.
Crowns/Inlays/Onlays	• 1 replacement per 10 years.
Bridges	• 1 in 10 years.
Periodontics	• Periodontal scaling & root planing: 1 per quadrant in any 24 month period.
Periodontics	• Periodontal surgery: 1 per quadrant in any 36 month period.
Oral Surgery: Simple Extractions	
Endodontics	• Root Canal treatment limited to 1 in 24 Months.
Dentures	• 1 in 10 years.
Periodontics	• Periodontal maintenance: 2 periodontal treatments in 1 year, includes 2 cleanings.
Consultations	• 1 per 12 months
Oral Surgery: Surgical Extractions	
Other Oral Surgery	

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\* Where two or more professionally acceptable dental treatments for a dental condition exist, reimbursement is based on the least costly treatment alternative. If you and your dentist have agreed on a treatment that is more costly than the treatment upon which the plan benefit is based, you will be responsible for any additional payment responsibility. To avoid any misunderstandings, we suggest you discuss treatment options with your dentist before services are rendered, and obtain a pretreatment estimate of benefits prior to receiving certain high cost services such as crowns, bridges or dentures. You and your dentist will each receive an Explanation of Benefits (EOB) outlining the services provided, your plans reimbursement for those services, and your out-of-pocket expense. Actual payments may vary from the pretreatment estimate depending upon annual maximums, plan frequency limits, deductibles and other limits applicable at time of payment.

The service categories and plan limitations shown above represent an overview of your Plan of Benefits. This document presents many services within each category, but is not a complete description of the Plan. Please see your Plan description for complete details. In the event of a conflict with this summary, the terms of the certificate will govern.

Like most group dental insurance policies, MetLife group policies contain certain exclusions, limitations and waiting periods and terms for keeping them in force. Please contact MetLife for details.