

Aetna Dental® plans

ID cards and digital tools to make your life easier

You don't need a dental ID card to get dental care

We want to make it easy for you to take advantage of your dental benefits.

How will your dentist know you're an Aetna Dental member? When you visit your dentist, simply tell the office your name, date of birth or member ID number.

What if you want a card?

Easy — visit your Aetna® member website at **Aetna.com** or download the Aetna Health™ app.

You can print an ID card for yourself and your dependents by selecting "ID Card" on the website or app. If your digital ID card says "No Election" or "Invalid Choice," then your plan requires you to choose a primary care dentist (PCD) who is in our network. Until you choose a PCD, your benefits and claims may be affected.*

Everything you need to manage your dental health

With our digital tools, you can:

- View your benefits summary and get information about what's covered under your plan
- · Find an in-network dentist
- View and pay your claims
- · Access your ID card whenever you need it

Visit your Aetna member website at **Aetna.com** or download the Aetna Health app.

Call **1-877-238-6200 (TTY: 711)** 24/7 if you have any questions.

*California/Arizona DMO® plan participants: If you have not selected a PCD, one may have been selected for you. View your digital ID card to determine if one was selected on your behalf.



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Use these digital tools to manage your dental health	
	Download on the App Store Google Play
Go to Aetna.com and log in to your member website.	Download the Aetna Health app by texting "DENTAL" to 90156 for a link (message and data rates apply).*

Dental benefits and dental insurance plans are offered and/or underwritten by Aetna Dental Inc., Aetna Dental of California Inc., Aetna Health Inc. and/or Aetna Life Insurance Company (Aetna). Each insurer has sole financial responsibility for its own products.

In Virginia, the DMO plan is known as the Dental Network Only plan (DNO). DNO in Virginia is not a health maintenance organization (HMO). To receive maximum benefits, members must choose a participating primary care dentist to coordinate their care with network providers.

Not for use in New Hampshire or Idaho.

In Illinois, DMO plans provide limited out-of-network benefits. However, in order to receive maximum benefits, members must select and have care coordinated by a participating primary care dentist. Illinois DMO is not an HMO.

In Texas, the preferred provider organization (PPO) plan is known as the participating dental network (PDN).

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Information is believed to be accurate as of the production date; however, it is subject to change. For more information about Aetna plans, refer to **Aetna.com**.

Policy forms issued in Idaho and Oklahoma include: GR-9/GR-9N, GR-23 and/or GR-29/GR-29N.

Policy forms issued in Missouri include: AL HGrpPol-Dental 01, DM HGrpAg 01.



^{*}Terms and conditions: **Bit.ly/2nlJFYG**. Privacy policy: **Aetna.com/legal-notices/privacy.html**. By texting 90156, you consent to receive a one-time automated marketing text message from Aetna with a link to download the Aetna Health app. Consent is not required to download the app. You can also download it by going to the App Store® or Google Play™.

Aetna and Innovation Health comply with applicable Federal civil rights laws and do not discriminate, exclude or treat people differently based on their race, color, national origin, sex, age, or disability.

Aetna and Innovation Health provide free aids/services to people with disabilities and to people who need language assistance.

If you need a qualified interpreter, written information in other formats, translation or other services, call the number on your ID card.

If you believe we have failed to provide these services or otherwise discriminated based on a protected class noted above, you can also file a grievance with the Civil Rights Coordinator by contacting: Civil Rights Coordinator,

P.O. Box 14462, Lexington, KY 40512 (CA HMO customers: PO Box 24030 Fresno, CA 93779), 1-800-648-7817, TTY: 711,

Fax: 859-425-3379 (CA HMO customers: 860-262-7705), CRCoordinator@aetna.com.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights Complaint Portal, available at https://ocrportal.hhs.gov/ocr/portal/lobby.jsf, or at: U.S. Department of Health and Human Services, 200 Independence Avenue SW., Room 509F, HHH Building, Washington, DC 20201, or at 1-800-368-1019, 800-537-7697 (TDD).

Aetna is the brand name used for products and services provided by one or more of the Aetna group of subsidiary companies, including Aetna Life Insurance Company, Coventry Health Care plans and their affiliates (Aetna). Innovation Health is the brand name used for products and services provided by Innovation Health Insurance Company and/or Innovation Health Plan, Inc. Innovation Health is an affiliate of Inova and Aetna Life Insurance Company and its affiliates. Aetna and its affiliates provide certain management services to Innovation Health.

For language assistance in your language call the number listed on your ID card at no cost. (English)

Para obtener asistencia lingüística en español, llame sin cargo al número que figura en su tarjeta de identificación. (Spanish)

欲取得繁體中文語言協助,請撥打您 ID 卡上所列的號碼,無需付費。(Chinese)

Pour une assistance linguistique en français appeler le numéro indiqué sur votre carte d'identité sans frais. (French)

Para sa tulong sa wika na nasa Tagalog, tawagan ang nakalistang numero sa iyong ID card nang walang bayad. (Tagalog)

T'áá shí shizaad k'ehjí bee shíká a'doowoł nínízingo Į́Diné k'ehjíÓ naaltsoos bee atah nílį́igo nanitinígíí béésh bee hane'é bikáá' áaji' t'áá jíík'e hólne'. (Navajo)

Benötigen Sie Hilfe oder Informationen auf Deutsch? Rufen Sie kostenlos die auf Ihrer Versicherungskarte aufgeführte Nummer an. (German)

ለአማርኛ ቋንቋ እንዛ በመታወቅያዎ ላይ በተጠቀሰው ቁጥር በነጻ ይደውሉ (Amharic)

Pou jwenn asistans nan lang Kreyòl Ayisyen, rele nimewo a yo endike nan kat idantifikasyon ou gratis. (French Creole)

Per ricevere assistenza linguistica in italiano, può chiamare gratuitamente il numero riportato sulla Sua scheda identificativa. (Italian)

日本語で援助をご希望の方は、IDカードに記載されている番号まで無料でお電話ください。 (Japanese)

한국어로 언어 지원을 받고 싶으시면 보험 ID 카드에 수록된 무료 통화번호로 전화해 주십시오. (Korean)

یارب امنهاری ی به نابز فرسی، نودب چیه بزن ه یا به هو امش یا کسبریور کاتر شن اسای اش مآده تا سامت ریگبی. بسیلگنا (Persian)

Aby uzyskać pomoc w języku polskim, zadzwoń bezpłatnie pod numer podany na karcie ID. (Polish)

Para obter assistência linguística em português ligue para o número grátis listado no seu cartão de identificação. (Portuguese)

Чтобы получить помощь русскоязычного переводчика, позвоните по бесплатному номеру, указанному в вашей ID-карте удостоверения личности. (Russian)

Để được hỗ trợ ngôn ngữ bằng (ngôn ngữ), hãy gọi miễn phí đến số được ghi trên thẻ ID của quý vị. (Vietnamese)