Quality health plans & benefits
Healthier living
Financial well-being
Intelligent solutions

aetna℠

Easy-to-use coverage to fit your budget

Aetna Dental® DMO® Plan

Take two easy steps to start your dental care

Step 1: Pick a PCD

- Your DMO* benefits and insurance plan begins with your primary care dentist (PCD). Visit **www.aetna.com** and click on Find a Doctor.
- See your PCD for regular exams. Your PCD can refer you to other dentists if you need specialty care.
- Each covered family member can pick a different PCD. You can change your PCD as often as once a month. Contact Member Services by the 15th of the month to make your change effective by the first day of the following month.**

Step 2: Visit your PCD

- Show your Aetna ID card.
- Pay your share of the cost. That could be a flat-dollar copay or a percentage of the cost (called coinsurance). Check your summary of benefits to learn this amount.
- There's no deductible and no annual dollar limits.
- And there are no claim forms to complete.

*In Illinois, the Dental DMO plan provides limited out-of-network benefits. However, in order to receive maximum benefits, members must select and have care coordinated by their PCD. In Illinois, the Dental DMO plan is not an HMO.

**Your PCD keeps a list of eligible patients that is updated monthly. Your name will appear on this list when it is updated the month after your selection. Some dentists will only treat patients whose names appear on this printed monthly roster. Once you are a member, you can call Member Services if your doctor needs to verify your eligibility.

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Your PCD may refer you to a specialty dentist

Need a specialist? Your PCD will refer you to a dentist in the Aetna network.*** There's usually no paperwork involved.

- Show your Aetna ID card at the time of your visit.
- Pay your share of the cost to the dentist. Your plan documents will show how much. You'll usually save because participating dentists have special rates for Aetna members.

No referrals for orthodontists

When you visit an orthodontist† who participates in the Aetna network, you won't need a referral.

Dental benefits online and on the go

Your secure, personalized member website

When you're an Aetna member, you get tools and resources to help manage your dental health and your benefits. All of your plan information and cost-savings tools are in one place — your Aetna Navigator® member website. When you sign up and use it, you're not just a member, you're ***a navigator***. Navigators are smart about their dental care. Sign up today at **www.aetna.com**.

Look up facts and articles about dental care

Simple Steps To Better Dental Health® is your source for dental information, as well as expert opinions from the Columbia University College of Dental Medicine. Learn about conditions, treatments and more. Try our interactive tools. Visit **www.simplestepsdental.com**.

Find what you need — wherever, whenever

The Aetna Mobile app puts our most popular online features at your fingertips. It's available for iPhone®, Android™ and BlackBerry® mobile devices.

Scan this code now to download.
Or visit **www.aetna.com/mobile.**

Enroll in the Aetna Dental DMO plan today!

***State laws vary with regard to out-of-network benefits. Some states allow limited benefits when you go out of network for covered services. In California, your PCD may refer you to out-of-network dentists in that state. Check your plan documents for details.

†Not all plans include orthodontic care. See your plan documents for coverage details. In California, referrals to specialty care are required.

The Aetna Dental DMO benefits and insurance plan is offered, underwritten and/or administered by Aetna Dental Inc., Aetna Dental of California Inc., Aetna Health Inc. and/or Aetna Life Insurance Company, and in Texas, by Aetna Dental Inc. (Aetna). Each insurer has sole responsibility for its own products.

This material is for information only and is not an offer or invitation to contract. An application must be completed to obtain coverage. Rates and benefits vary by location. Dental benefits and dental insurance plans contain exclusions and limitations. Not all dental 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/or group size and are subject to change. Dental 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 dental services. Dental information programs provide general dental information and are not a substitute for diagnosis or treatment by a dentist or other dental care professional. 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 **www.aetna.com**.

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

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