

Here are just some of your covered dental services

- Preventive care (cleanings, bitewing and full-mouth X-rays, and more)
- Basic care (fillings and basic restorative work)
- Major services (bridges, crowns, dentures and more)

Some covered services have limitations based on your age or how often they are used. Refer to the Summary of Benefits for details on benefit levels and covered services.

What's not covered?

Here's a partial listing of charges and services this dental plan does not cover. For a complete listing of exclusions and limitations, refer to your plan documents.

- Dental services or supplies that are primarily used to alter, improve or enhance appearance
- Experimental services, supplies or procedures
- Treatment of any jaw joint disorder, such as temporomandibular joint disorder (TMJ)*
- Replacement of lost, missing or stolen appliances and certain damaged appliances
- Those services that Aetna defines as not necessary for the diagnosis, care or treatment of a condition involved
- All other limitations and exclusions in your plan documents

Enroll today!

Plus! Get discounts on oral health care products. Save on Sonicare® toothbrushes and a variety of Epic Dental products like gum, mints, toothpastes, and mouth rinses that contain xylitol — a natural sweetener designed to stop tooth decay.

Your dentist, your choice

Aetna Dental® PPO Plan

The freedom to visit any dentist you choose!

*Unless additional coverage has been purchased by your plan sponsor.

If you need this material translated into another language, please call Member Services at 1-877-238-6200.

Si usted necesita este documento en otro idioma, por favor llame a Servicios al Miembro al 1-877-238-6200.

This material is for informational purposes only and is neither an offer of coverage nor dental advice. It contains only a partial, general description of plan benefits or programs and does not constitute a contract. Aetna arranges for the provision of dental care services. However, Aetna itself is not a provider of dental care services, and therefore, cannot guarantee any results or outcomes.

Dental insurance plans contain exclusions and some benefits are subject to limitations and visit maximums. Consult the plan documents (Booklet, Booklet-certificate or Group Policy) to determine governing contractual provisions, including procedures, exclusions and limitations relating to your plan. The availability of a plan or program may vary by geographic service area and by plan design. Minimum participation requirements may apply. Specific products may not be available on both an employer-funded and insured basis. Participating dentists and other dental providers are independent contractors and are neither employees nor agents of Aetna. The availability of any particular provider cannot be guaranteed, and provider network composition is subject to change. Vision One®, Alternative Health Care and the Fitness Program are rate-access programs and may be in addition to any plan benefits. Program providers are solely responsible for the products and services provided thereunder. Vision One is a registered trademark of Cole Vision Corporation. The Fitness program is provided in conjunction with GlobalFit™.

While this material is believed to be accurate as of the print date, it is subject to change.

We want you to know®



www.aetna.com

We want you to know®





You'll love the flexibility of the Aetna Dental PPO insurance plan.

Ah, freedom! See any dentist you choose.

Go to any licensed dentist!

- No referrals required.
- No need to choose a primary care dentist.
- Affordable coverage for cleanings, X-rays, restorative work and more.

Take your choice whenever you need dental care ...

CHOICE 1:

For simple, affordable coverage —

Visit a participating dentist

Participating dentists have agreed to offer certain services at a negotiated rate — so you generally pay less out of pocket for your care.

- Refer to our DocFind® directory at www.aetna.com to select a participating dentist, or call Member Services.
- Show your Aetna ID card during your visit.
- If your plan has a *deductible* (a dollar amount you must pay for covered expenses in a plan year), you must meet the deductible before your plan covers your eligible dental expenses.
- After you meet your deductible, you will pay a *coinsurance amount* (a percentage of covered expenses) at the time of service. Refer to your Dental Benefits Summary to learn this amount.
- Your dentist will submit your claims for you.
- Participating dentists are contractually required to offer their discounted rates for services that are not covered by the dental plan.

CHOICE #2:

For maximum flexibility —

See any other licensed dentist

You also have the freedom to visit a licensed dentist who does not participate in the Aetna network.

- If your plan includes a deductible, you must meet this before your dental plan covers your eligible dental expenses.
- When you've met your deductible, you pay the coinsurance amount at the time of service. This amount is generally higher than the percentage you pay when you visit a participating dentist.
- Only participating dentists have agreed to discounted rates for Aetna members, so your out-of-pocket expenses may be higher when you go outside the Aetna network.
- You may have to file your own claims, and you may be subject to *balance billing* (the difference between the amount covered by your plan and the amount charged by your dentist).

Emergency care

You're covered for emergency dental care 24 hours a day, 7 days a week. Just call any licensed dentist if you need emergency care.

Online resources

Manage your dental benefits — it's a snap

Once you're a member, register on our secure Aetna Navigator™ member website at www.aetna.com. There you can:

- Find a network dentist through our online directory.
- Review who is covered by your plan.
- Check claims and review statements.
- Request replacement ID cards.
- Contact Member Services.

Dental health information at your fingertips

Visit the Aetna Simple Steps to Better Dental Health® website to find articles, illustrations, interactive tools, information on dental conditions, treatments, and more. Visit www.simplestepsdental.com.

Aetna membership brings you even more

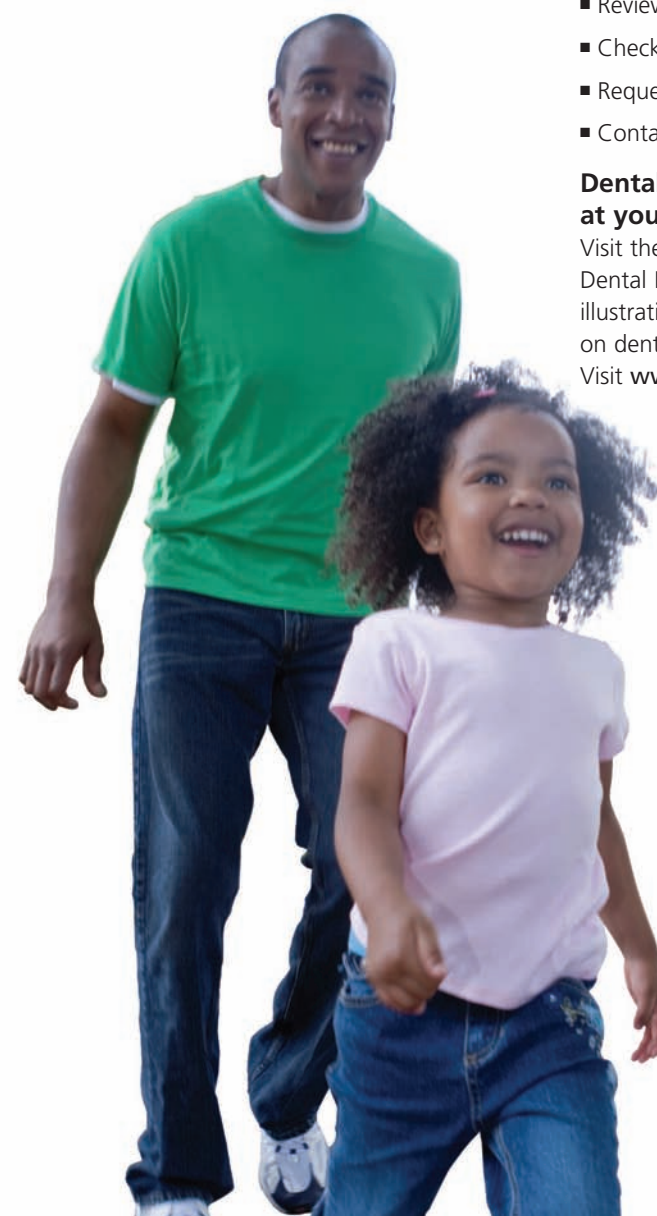
Save on vision, alternative health care and fitness, too

Yes, this is a dental insurance plan. But isn't it great to get discounts on other health services, as well? As part of our commitment to help you maintain your overall health, we also give you valuable discounts on a variety of vision, hearing, alternative health, and fitness products and services.

These discounts are not insurance.

Show your Aetna ID card at participating locations to save on:

- Eye care products, including eyeglasses, contact lenses, nonprescription sunglasses and accessories
- Eye exams at thousands of locations nationwide
- LASIK eye surgery
- Hearing products
- Membership in participating health clubs
- Certain home exercise equipment
- Chiropractic, acupuncture, vitamins, and more!



Aetna is the brand name used for products and services provided by one or more of the Aetna group of subsidiary companies. The company that underwrites or administers Aetna Dental Preferred Provider Organization (PPO) benefits coverage is Aetna Life Insurance Company.

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

Did you know?

Your dentist can identify a lot more than tooth decay and gingivitis.

Up to 90% of whole-body illnesses, including diabetes and cardiovascular disease, show their first signs in the mouth.* That's why seeing your dentist regularly is one of the best defenses against illness — for good oral health as well as overall health.

*Academy of General Dentistry website, www.agd.org. "The Importance of Oral Health." September 2003. Accessed February 2006.