Freedom-of-Choice Plan Design

Aetna Dental[®] Benefits

Get the advantages of *two* dental plans ... in one!

We want you to know^M

A Healthy Body Starts with a Healthy Smile

Good dental care means more than a simple teeth cleaning. Visiting your dentist can help identify other medical conditions. In fact, many diseases, including diabetes and cardiovascular disease, show their first signs in the mouth.¹

Your dentist may be the *first* medical professional to identify a potential health problem. That's why regular visits to the dentist and an effective dental benefits plan are among your best defenses against illness and disease — in both the mouth *and* the body!

The Aetna Dental Freedom-of-Choice plan design can help by giving you the advantages of two of our most popular dental plans ... in *one*, easy-to-use package. Plus, you receive a wealth of resources at your fingertips ... to help keep your teeth — and your overall health — the best they can be.

Benefits To Keep You Smiling

- Get affordable coverage for a wide range of services and access to our broad provider networks.
- Choose the DMO[®] plan, and you generally pay less out-of-pocket.
- Choose the PPO plan, and enjoy the freedom to visit any licensed dentist for covered services — no referrals needed.
- Switch between plans each month or stay with the plan you originally selected. The choice is always yours!

¹Academy of General Dentistry website, **www.agd.org**, "The Importance of Oral Health," September 2003.

"Aetna" is the brand name used for products and services provided by one or more of the Aetna group of subsidiary companies. The DMO plan is provided or administered by Aetna Health Inc., Aetna Dental Inc. and/or Aetna Life Insurance Company. In Arizona, the DMO plan is provided by Aetna Health Inc. The PPO plan is underwritten or administered by Aetna Life Insurance Company.

For the Commonwealth of Virginia, one or more of the following policy numbers may apply: GR-29, GR-9.

Welcome to the Aetna Dental Freedom-of-Choice Plan Design

How Your Freedom-of-Choice Plan Design Works

First, decide which plan you want to participate in (either DMO or PPO*). Refer to our DocFind® online provider directory at **www.aetna.com** to find a participating dentist. Participating dentists must complete our credentialing process and are recredentialed on an ongoing basis.

Once enrolled, follow the rules of your plan as described in the chart below. During the year, you are free to switch between plans each month. Simply contact Member Services by the 15th of the month to make your change effective by the first day of the following month. Remember, you and your family must be enrolled in the same plan.

DMO

DMO out-of-pocket expenses are generally lower than in the Dental PPO plan.

How the DMO Plan Works

- Choose a primary care dentist (PCD) who participates in the Aetna DMO plan.
- Each covered family member can choose his/her own PCD.
- You will receive an ID card with the dentist's name and telephone number.
- Visit your PCD for covered services.**
- Show your ID card at the time of your visit.
- Copayments (a flat dollar amount or a percentage of covered expenses) apply to certain situations.
- Best of all, there are:
- > No deductibles.
- > No dollar annual maximums.
- No claims forms.

Specialty Care

- Your PCD can refer you to a participating specialist for covered services when necessary.
- If your plan includes orthodontic coverage, you may visit a participating orthodontist without a referral. You will be covered up to the benefit limitation of your plan. Refer to your plan documents for a complete list of benefits and limitations.

Emergency Care

- Call your PCD if you require emergency care.
- If you are outside your covered service area, call the toll-free Member Services number on your ID card.
- *DMO stands for Dental Maintenance Organization. PPO stands for Preferred Provider Organization.
- **Refer to your Summary of Benefits for a sample listing of the benefits available to you. Please see your plan documents for additional details; certain age and frequency limitations may apply.

ΡΡΟ

The PPO plan provides more flexibility in choosing a dentist.

How the PPO Plan Works

- Choose any licensed dentist, from nearly 63,000*** available dental PPO practice locations nationwide, for covered services.
- If your dentist participates in the Aetna PPO network, your payment will be based on negotiated fees and your out-of-pocket costs generally will be lower.
- Covered families will receive two ID cards.
- Visit your dentist.
- Show your ID card at the time of service.
- Pay coinsurance (a percentage of covered expenses) or a *deductible* (a dollar amount you must pay for covered expenses in a plan year) as applicable. Your coinsurance generally will be lower if you visit a participating dentist.
- Annual and lifetime maximums may apply.

***Aetna Enterprise Database as of 3/15/04.





- Participating dentists are not permitted to *balance bill* (the difference between the amount covered by Aetna and the amount charged by your dentist) additional charges.
- When you visit a participating dentist, your dentist submits claims. When you visit a nonparticipating dentist, you or your dentist submits claims forms.

Specialty Care

- No referrals are needed. You are free to see any specialist you choose for a covered expense.
- You are responsible for copayments, coinsurance or deductibles as applicable. Refer to your plan documents for a complete list of benefits and limitations.

Emergency Care

 If you require emergency care, visit any licensed dentist. You may need to submit a claim form. If you visit a participating PPO network dentist, your out-of-pocket expenses may be lower.



Dental Member Education Tools

Information at your fingertips ... guaranteed to make you Smile

There's more than one way to achieve a healthy smile. We also give you the tools you need to manage your dental benefits and access the dental health information that matters most to you — online, or by calling a toll-free number. As a dental Freedom-of-Choice plan design member, you can take advantage of these valuable resources:

Aetna Navigator™ Member Self-Service Website

When you log on to **www.aetna.com** and select our easy-to-use Aetna Navigator member website, you can perform a variety of self-service transactions online — 24 hours a day, 7 days a week — wherever you have Internet access. When you register for Aetna Navigator, you can:

- Review who is covered on your dental plan.
- Check the status of your dental claim.
- Access Explanation of Benefits (EOB) statements for certain services.
- Find a participating dentist.
- View and print instant eligibility information, and request replacement member ID cards.
- Send e-mail inquiries to Member Services.

Dental Health Information Website

This online dental health resource, available through the Aetna InteliHealth® website, can help you become a better-informed health care consumer. You'll find information on dozens of dental conditions and treatments, illustrations, interactive tools, answers to common questions, and articles in several dental specialty areas. To visit, go to **www.intelihealth.com**, and click on "Dental Health." While there, check out the Solution Sleuth[™] tool, which helps you investigate treatment options for several common dental conditions.

Member Services — Service To Smile About

Our dedicated team of trained service professionals is ready to assist you if you have questions regarding your coverage or a claim, or need help finding a dentist. Simply call the toll-free number on your ID card for answers to your questions about the plan. If you are not a member yet, or have not received your ID card, please contact your plan administrator.

When you enroll in the PPO plan, you also get:

Price-A-Dental Procedure^s Tool

From Aetna Navigator, it's just a quick click to our Price-A-Dental Procedure tool, a convenient cost-comparison tool that can help you plan for future dental expenses. This resource lets you compare the average estimated costs for select services from network dentists to those of nonparticipating dentists.

Special Savings on Vision and Fitness

At Aetna, we're committed to helping you maintain your overall health from head to toe! So along with your Freedom-of-Choice plan design coverage, you also have access to discounts on a variety of vision and fitness products and services. Just present your ID card at program locations to take advantage of the following great savings!

Vision One® Discount Program

Save on:

- Eye care products including eyeglasses, contact lenses, nonprescription sunglasses and accessories.
- Eye exams at thousands of locations nationwide.
- LASIK eye surgery.

Fitness Program

You also receive:

- Access to special membership rates at participating health clubs.
- Discounts on certain home exercise equipment.

Need more information?

Visit our website at www.aetna.com, click on Aetna Navigator, then products and programs, for additional program details.

Your Covered Dental Services

Your dental Freedom-of-Choice plan design offers you coverage for a broad range of dental services, including:

- 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)

Age and frequency limitations apply to some covered services. Refer to your Summary of Benefits for details on benefit levels and covered services. If you enroll in the DMO plan and seek a covered service from a dentist who does not participate in the DMO network, your benefits may be significantly reduced or not covered.

What's Not Covered

Below is a partial list of the charges and services this dental plan does not cover. For a complete list 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.*
- 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.

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



Enroll today!

We look forward to welcoming you and your family to the Aetna Dental Freedomof-Choice plan design.

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.

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