Choose a participating dentist and save



When you visit a dentist who participates in the Humana Dental PPO Network, you can save up to 30 percent on average billed charges. Plus, the PPO (applies to Traditional Preferred, PPO and Preventive Plus) network is nationwide so you can find a participating dentist near your home or work, when you're on vacation or away at college.

For example: A member needs a dental service and has a Humana Dental PPO plan that pays 80 percent to a dentist who participates in our network and 50 percent to a dentist who does not.² The chart shows the member will save \$90 for this service by visiting a participating dentist because of the Humana dental discount.

	Retail charge	Amount billed	Humana dental pays	Member pays
Participating dentist	\$250	\$175	\$140 (80%)	\$35
Nonparticipating dentist	\$250	\$250	\$125 (50%)	\$125
			Member savings	\$90

Find a participating dentist

Go to **Humana.com** anytime and select "Find a healthcare provider." We update the list of participating dentists daily. You also can call **1-800-233-4013 (TTY: 711)**. A Humana Customer Care specialist will be happy to help you from 8 a.m. – 6 p.m., Monday – Friday.

Refer your dentist

If your dentist doesn't participate, please help us get your dentist in our PPO network. That way, you can continue to see the dentist you know and trust while receiving the best value from your plan. Simply add your name to the card below, give it to your dentist at your next visit and ask him or her to return it to Humana.

We're here to help Call 1-800-233-4013 (TTY: 711) for Customer Care.

- ¹ Plus network in Texas
- ² Nonparticipating dentists can also bill you for charges above the amount covered by your Humana dental plan. To ensure you do not receive additional charges, visit a participating PPO network dentist. Example assumes member has met deductible. The chart is for illustrative purposes only. Actual amounts and benefit plans vary by employer.

Discrimination is against the law

Humana Inc. and its subsidiaries comply with applicable federal civil rights laws and do not discriminate on the basis of race, color, national origin, age, disability or sex. Humana Inc. and its subsidiaries do not exclude people or treat them differently because of race, color, national origin, age, disability or sex.

Humana Inc. and its subsidiaries provide:

- Free auxiliary aids and services, such as qualified sign language interpreters, video remote interpretation, and written information in other formats to people with disabilities when such auxiliary aids and services are necessary to ensure an equal opportunity to participate.
- Free language services to people whose primary language is not English when those services are necessary to provide meaningful access, such as translated documents or oral interpretation.

If you need these services, call **1-877-320-1235**, or if you use a TTY, call **711**.

If you believe that Humana Inc. and its subsidiaries have failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability or sex, you can file a grievance with:

Discrimination Grievances

Telephone with area code

P.O. Box 14618

Lexington, KY 40512-4618

Refer your dentist

Add your name and give this card to your dentist to return to us. We'll make sure he or she gets the details about participating in the Humana Dental PPO Network.

Join the Humana Dental PPO Network

Your patient wants you to join our network. For details, complete and mail this card. Thank you! Please print

Date		
Dentist's name		
Specialty		
Address		
City	State	ZIP code



If you need help filing a grievance, call **1-877-320-1235,** or if you use a TTY, call **711**.

You can also file a civil rights complaint with the **U.S. Department of Health and Human Services**, Office for Civil Rights electronically through the Office for Civil Rights Complaint Portal, available at

https://ocrportal.hhs.gov/ocr/portal/lobby.jsf, or by mail or phone at:

U.S. Department of Health and Human Services

200 Independence Avenue, SW Room 509F, HHH Building Washington, D.C. 20201

1-800-368-1019, 800-537-7697 (TDD)

Complaint forms are available at http://www.hhs.gov/ocr/office/file/index.html

Multi-Language Interpreter Services

English: ATTENTION: If you do not speak English, language assistance services, free of charge, are available to you. Call **1-877-320-1235 (TTY: 711)**.

Español (Spanish): ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al **1-877-320-1235 (TTY: 711)**.

繁體中文 (Chinese): 注意:如果您使用繁體中文,您可以免費獲得語言援助服務。請致電 **1-877-320-1235 (TTY: 711)**。

Tiếng Việt (Vietnamese): CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số **1-877-320-1235 (TTY: 711)**.

한국어 (Korean): 주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-877-320-1235 (TTY: 711)번으로 전화해 주십시오.

Tagalog (Tagalog – Filipino): PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa **1-877-320-1235 (TTY: 711)**.

Русский (Russian): ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-877-320-1235 (телетайп: 711).

Kreyòl Ayisyen (French Creole): ATANSYON: Si w pale Kreyòl Ayisyen, gen sèvis èd pou lang ki disponib gratis pou ou. Rele **1-877-320-1235 (TTY: 711)**.

Français (French): ATTENTION : Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le **1-877-320-1235 (ATS : 711)**.

Polski (Polish): UWAGA: Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Zadzwoń pod numer **1-877-320-1235 (TTY: 711)**.

Português (Portuguese): ATENÇÃO: Se fala português, encontram-se disponíveis serviços linguísticos, grátis. Ligue para **1-877-320-1235 (TTY: 711)**.

Italiano (Italian): ATTENZIONE: In caso la lingua parlata sia l'italiano, sono disponibili servizi di assistenza linguistica gratuiti. Chiamare il numero **1-877-320-1235 (TTY: 711)**.

Deutsch (German): ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: **1-877-320-1235 (TTY: 711)**.

日本語 (Japanese): 注意事項:日本語を話される場合、無料の言語支援をご利用いただけます。**1-877-320-1235 (TTY: 711)** まで、お電話にてご連絡ください。

ناف (Farsi):

توجه: اگر به زبان فارسی گفتگو می کنید، تسهیلات زبانی بصورت رایگان برای شما فراهم می باشد. با**1235-320-778-1** (TTY: 711) تماس بگیرید.

Diné Bizaad (Navajo): Díí baa akó nínízin: Díí saad bee yáníłti'go Diné Bizaad, saad bee áká'ánída'áwo'déé', t'áá jiik'eh, éi ná hóló, koji' hódíílnih **1-877-320-1235 (TTY: 711)**.

(Arabic): العربية

ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم 1235-320-1877 (رقم هاتف الصم والبكم: 711).

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