

Medicare Advantage (MA) dental benefits for 2023

Refer to the table below to find the 2023 MA dental benefit document that matches the six-character DEN code listed on the back of your member Humana MA ID card.

These benefit documents, listed in numerical order, provide the covered American Dental Association (ADA) codes and benefit frequencies.

CLICK ON THE DEN NUMBER LINKS BELOW TO ACCESS THE 2023 HUMANA DENTAL BENEFITS

DEN002	DEN003	DEN007	DEN008	DEN010	DEN012	DEN013	DEN014	DEN019	DEN038
DEN042	DEN044	DEN046	DEN050	DEN053	DEN057	DEN059	DEN061	DEN070	DEN072
DEN078	DEN080	DEN081	DEN086	DEN088	DEN089	DEN091	DEN098	DEN109	DEN110
DEN112	DEN115	DEN121	DEN123	DEN130	DEN133	DEN142	DEN143	DEN144	DEN145
DEN150	DEN151	DEN152	DEN158	DEN170	DEN171	DEN178	DEN185	DEN186	DEN187
DEN189	DEN204	DEN205	DEN206	DEN207	DEN210	DEN211	DEN212	DEN213	DEN214
DEN215	DEN216	DEN217	DEN218	DEN219	DEN220	DEN221	DEN227	DEN228	DEN229
DEN230	DEN237	DEN242	DEN246	DEN277	DEN278	DEN279	DEN280	DEN281	DEN285
DEN286	DEN287	DEN288	DEN290	DEN291	DEN292	DEN293	DEN310	DEN311	DEN312
DEN313	DEN315	DEN316	DEN319	DEN322	DEN323	DEN325	DEN328	DEN329	DEN331
DEN333	DEN334	DEN336	DEN337	DEN338	DEN339	DEN343	DEN344	DEN345	DEN346
DEN347	DEN349	DEN350	DEN351	DEN352	DEN353	DEN354	DEN355	DEN356	DEN359
DEN360	DEN362	DEN363	DEN364	DEN365	DEN368	DEN369	DEN371	DEN372	DEN373
DEN374	DEN377	DEN378	DEN379	DEN380	DEN383	DEN385	DEN386	DEN389	DEN411
DEN412	DEN413	DEN414	DEN415	DEN416	DEN417	DEN418	DEN419	DEN432	DEN441
DEN444	DEN447	DEN448	DEN449	DEN458	DEN459	DEN468	DEN478	DEN489	DEN490
DEN491	DEN492	DEN493	DEN494	DEN495	DEN496	DEN497	DEN498	DEN502	DEN503
DEN504	DEN506	DEN510	DEN511	DEN526	DEN564	DEN567	DEN569	DEN603	DEN613
DEN616	DEN617	DEN622	DEN628	DEN631	DEN632	DEN634	DEN637	DEN647	DEN651
DEN653	DEN654	DEN660	DEN674	DEN677	DEN750	DEN756	DEN760	DEN767	DEN768
DEN781	DEN786	DEN787	DEN790	DEN791	DEN792	DEN794	DEN838	DEN839	DEN840
DEN843	DEN887	DEN888	DEN890	DEN898	DEN906	DEN933	DEN935	DEN946	DEN947
DEN948	DEN949	DEN951	DEN954	DEN958	DEN961	DEN975	DEN976	DEN977	DEN978
DEN979	DEN982	DEN983	DEN984						

The shaded cells indicate dental allowance plans. Patients can use up to the plan's annual maximum with no frequency limitations on services. This provides more flexibility for patients to receive the services they need, when they need them. Claims process and clinical review still apply.

The Humana MA dental benefit summary documents may update throughout the year. Therefore, it is best to access them using the links provided above (click on the DEN code to open link) rather than downloading or printing the documents. Updates will be listed as they occur.

Revised 3/21/2023: DEN372



Important

At Humana, it is important you are treated fairly.

Humana Inc. and its subsidiaries do not discriminate or exclude people because of their race, color, national origin, age, disability, sex, sexual orientation, gender, gender identity, ancestry, ethnicity, marital status, religion, or language. Discrimination is against the law. Humana and its subsidiaries comply with applicable Federal Civil Rights laws. If you believe that you have been discriminated against by Humana or its subsidiaries, there are ways to get help.

- You may file a complaint, also known as a grievance:
Discrimination Grievances, P.O. Box 14618, Lexington, KY 40512-4618
If you need help filing a grievance, call _____ 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 their 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, **800-368-1019, 800-537-7697 (TDD)**. Complaint forms are available at <https://www.hhs.gov/ocr/office/file/index.html>.
- **California residents:** You may also call California Department of Insurance toll-free hotline number: **800-927-HELP (4357)**, to file a grievance.

Auxiliary aids and services, free of charge, are available to you. (TTY: 711)

Humana provides 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

Language assistance services, free of charge, are available to you. (TTY: 711)

Español (Spanish): Llame al número arriba indicado para recibir servicios gratuitos de asistencia lingüística.

繁體中文 (Chinese): 撥打上面的電話號碼即可獲得免費語言援助服務。

Tiếng Việt (Vietnamese): Xin gọi số điện thoại trên đây để nhận được các dịch vụ hỗ trợ ngôn ngữ miễn phí.

한국어 (Korean): 무료 언어 지원 서비스를 받으려면 위의 번호로 전화하십시오.

Tagalog (Tagalog – Filipino): Tawagan ang numero sa itaas upang makatanggap ng mga serbisyo ng tulong sa wika nang walang bayad.

Русский (Russian): Позвоните по номеру, указанному выше, чтобы получить бесплатные услуги перевода.

Kreyòl Ayisyen (French Creole): Rele nimewo ki pi wo la a, pou resevwa sèvis èd pou lang ki gratis.

Français (French): Appelez le numéro ci-dessus pour recevoir gratuitement des services d'aide linguistique.

Polski (Polish): Aby skorzystać z bezpłatnej pomocy językowej, proszę zadzwonić pod wyżej podany numer.

Português (Portuguese): Ligue para o número acima indicado para receber serviços linguísticos, grátis.

Italiano (Italian): Chiamare il numero sopra per ricevere servizi di assistenza linguistica gratuiti.

Deutsch (German): Wählen Sie die oben angegebene Nummer, um kostenlose sprachliche Hilfsdienstleistungen zu erhalten.

日本語 (Japanese): 無料の言語支援サービスをご要望の場合は、上記の番号までお電話ください。

فارسی (Farsi)

برای دریافت تسهیلات زبانی بصورت رایگان با شماره فوق تماس بگیرید.

Diné Bizaad (Navajo): Wóda hí béésh bee hani'í bee wolta'ígíí bich'í' hódíílnih éí bee t'áá jiik'eh saad bee áká'ánída'áwo'déé nika'adoowoł.

العربية (Arabic)

الرجاء الاتصال بالرقم المبين أعلاه للحصول على خدمات مجانية للمساعدة بلغتك

GCHJV5REN 0721