Committing to proper dental care doesn’t just keep your teeth and mouth healthy. It can keep your whole body healthy by warding off infections and gum disease, which may be linked to conditions such as diabetes and heart disease.* The best way to do this is by brushing and flossing your teeth regularly and seeing a dentist for checkups.

What your plan covers

As an Aetna International member, some of the services covered by your Aetna Dental® PPO plan include:

- Preventive care — cleanings, bitewing x-rays and full-mouth x-rays
- Basic care — fillings and basic restorative work
- Major services — bridges, crowns and dentures

See your plan documents for specific benefit coverage and a complete list of covered services.
A healthy you starts with good dental care

How your plan works

When seeking dental care in the United States:
Visit any licensed dentist for your covered dental services.

• If you choose a provider that’s in our Aetna Dental PPO network, you’ll get extra savings and less hassle because the provider will submit your claim form for you. You pay the portion of your bill called for by your specific benefit coverage, and we’ll pay the rest.

• If you choose a provider outside our network, you’ll need to pay the bill upfront and submit a claim form to us for reimbursement.

When seeking dental care outside the United States:
You can visit any licensed dentist no matter where you are in the world. Simply pay your charges at the time of service and submit a claim form to us for reimbursement.

Easy to use
Wherever you go, you won’t need referrals with this dental insurance plan. You can easily find a dental provider near you using these steps.

1. Log in to Health Hub, your secure member website, at aetnainternational.com.

2. Click “Find health care” at the top of the page.

3. Select a country and city using the drop-down boxes, then click “Search.”

Understand your costs
Check the benefits summary that comes with your plan information to find your share of the costs. This may include your:

Deductible — the dollar amount some plans require you to pay for services before coverage begins.

Coinsurance — the percentage of health care expenses you pay after your deductible. Your health plan pays the rest. For instance, you pay 20 percent, and your plan pays 80 percent.

Balance bill — some dentists charge more than the plan allows. In some cases, you may have to pay this difference.

Your dental plan may also have annual and lifetime limits on coverage. And there may be age and frequency limits on some services.

Questions?
Just call us using the number on your Member ID card.

*Source: Healthwise, Incorporated. Available at www.healthwise.net/aetna. Accessed 1 February 2018. Aetna® is a trademark of Aetna Inc. and is protected throughout the world by trademark registrations and treaties.

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