

Treating members with Aetna Dental[®] Medicare Advantage dental plans

Did you know? Aetna Dental Medicare Advantage members covered under a dental exclusive provider organization (EPO) or a preferred provider organization (PPO) plan are supported by the Aetna Dental PPO network.

Treating patients

As a participating dentist, you'll be able to see all Aetna Dental Medicare Advantage members, with **reimbursements paid according to your contracted Aetna PPO fee schedule.**

Medicare Advantage dental members may reference having an HMO, DSNP, POS or PPO plan. Please note that all of these plans are reimbursed according to your Aetna PPO fee schedule.

How will you know if a member's plan is reimbursed according to your Aetna PPO fee schedule?

Look at the member's ID card. On the front upper right corner it will have one of the following displayed:

- Medicare Dental EPO
- Medicare Dental PPO

Both indicate that you'll be reimbursed according to your contracted Aetna PPO fee schedule.

There are different payer IDs, claims mailing addresses and phone numbers for Aetna Dental Medicare Advantage plans. Please see the sample member identification cards below so that you can easily identify these patients when they visit your office.

Aetna Medicare ID card Guide 1

Dual-Eligible Special Needs Plan (DSNP)

aetna™ Medicare HMO
Medicare Dental EPO

Aetna Medicare Assure Plus (HMO D-SNP)
PLAN# 000003-FL000027
ID 300003669500
NAME ZIEMOWIT E SHEN
RxBIN 610502 RxPCN MEDDAET
RxGRP# RXAETD

MedicareRx
Prescription Drug Coverage

ISSUER (80840)
Nature Coast Primary Care, PLLC
352-436-4328
Printed on: 01/13/2020

H1609-049

Front

Dental Product

Dental claims mailing address

Dental Payer ID

www.aetnamedicare.com

Customer Service:
Medical, Dental and Behavioral Health 1-833-570-6670
Prescription Drug 1-833-620-8808
24 Hour Nurse Line 1-855-493-7019
Provider Services 1-800-624-0756
TDD/TTY 711

Send claims to:
Aetna Medicare
PO Box 981106
El Paso, TX 79998-1106

PCPRequired/RefRequired

This card does not guarantee coverage.

Payer ID# 60054

Dental Customer Service

Back

Group Plan

aetna™ Advantra HMO Medicare HMO
Medicare Dental EPO

BRICKLAYERS LOCAL 1
ENHANCED
PLAN# 100003-01EG0001
ID 300003515800
NAME SHELPEY A SHAWINOK
RxBIN 610502 RxPCN MEDDAET
RxGRP# RXAETD

MedicareRx
Prescription Drug Coverage

PCP \$15
ER \$50
AS \$250
HO \$250/D
SP \$25

ISSUER (80840)
Nature Coast Primary Care, PLLC
352-436-4328
Printed on: 01/14/2020

H2663-810

Front

Dental Product

Dental claims mailing address

Dental Payer ID

www.aetnaretireplans.com

Customer Service:
Medical, Dental and Behavioral Health 1-855-275-5888
Prescription Drug 1-866-241-0357
24 Hour Nurse Line 1-855-493-7019
Provider Services 1-800-624-0756
TDD/TTY 711

Send claims to:
Aetna Medicare
PO Box 981106
El Paso, TX 79998-1106

PCPRequired/RefRequired

This card does not guarantee coverage.

Payer ID# 60054

Dental Customer Service

Back

Individual Plan

aetna™ Medicare PPO Medicare Dental PPO

Aetna Medicare Advantra Premier Plus (PPO)
PLAN# 000003-PA000021
ID 350004673200
NAME KALAIKOVAN ADRIAN
RxBIN 610502 RxPCN MEDDAET
RxGRP# RXAETD

MedicareRx
Prescription Drug Coverage

PCP \$5
ER \$90

ISSUER (80840)

Printed on: 10/31/2019

H5522-002

Front

Dental Product

Dental claims mailing address

Dental Payer ID

www.aetnamedicare.com

Customer Service:
Medical, Dental and Behavioral Health 1-833-570-6670
Prescription Drug 1-833-620-8808
24 Hour Nurse Line 1-855-493-7019
Provider Services 1-800-624-0756
TDD/TTY 711

Send claims to:
Aetna Medicare
PO Box 981106
El Paso, TX 79998-1106

This card does not guarantee coverage.

Payer ID# 60054
Medicare limiting charges apply.

Dental Customer Service

Back

Aetna Medicare ID card Guide 2

Individual Plan PPO

aetna Medicare PPO
Medicare Dental PPO

ABC PLAN
 GRP#: 123456
 ID SAMPLE ID
 NAME JOHN Q SAMPLE
 RxBIN 610502 RxPCN MEDDAET
 RxGRP# RXAETD
 ISSUER (80840)

MEMBER SINCE 2020
 RX

MedicareRx
 Prescription Drug Coverage

PCP 0 ER 0

PRINTED ON: CMS- XXXXX XXX

Dental Product

Dental Payer ID

Front

www.aetnamedicare.com

Customer Service:
 Medical and Behavioral Health 1-855-523-6455
 Prescription Drug 1-855-523-6455
 Dental (Member and Provider) 1-866-690-4916
 Medical Provider Line 1-800-624-0756
 TDD/TTY 711

Send medical claims to:
 Aetna Medicare
 PO BOX 981106
 El Paso, TX 79998-1106

Send dental claims to:
 Aetna Medicare
 PO BOX 7762
 London, KY 40742

This card does not guarantee coverage.
 Medical Payer ID# 60054
 Dental Payer ID# 18014
 Medicare limiting charges apply.

7739-06/17

Dental Customer Service

Dental Claims mailing address

Back

Individual Plan HMO

aetna Medicare HMO
Medicare Dental EPO

ABC PLAN
 GRP#: 123456
 ID SAMPLE ID
 NAME JOHN Q SAMPLE
 RxBIN 610502 RxPCN MEDDAET
 RxGRP# RXAETD
 ISSUER (80840)

MEMBER SINCE 2020
 RX

MedicareRx
 Prescription Drug Coverage

PCP 0 ER 0

PRINTED ON: CMS- XXXXX XXX

Dental Product

Dental Payer ID

Front

www.aetnamedicare.com

Customer Service:
 Medical and Behavioral Health 1-866-319-9631
 Prescription Drug 1-866-319-9631
 Dental (Member and Provider) 1-866-690-4916
 Medical Provider Line 1-800-624-0756
 TDD/TTY 711

Send medical claims to:
 Aetna Medicare
 PO BOX 981106
 El Paso, TX 79998-1106

Send dental claims to:
 Aetna Medicare
 PO BOX 7762
 London, KY 40742

This card does not guarantee coverage.
 Medical Payer ID# 60054
 Dental Payer ID# 18014

7538-06/17

Dental Customer Service

Dental Claims mailing address

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Group Plan

aetna Medicare PPO
Medicare Dental PPO

ABC PLAN
 GRP#: 12345
 ID SAMPLEID
 NAME JOHN SAMPLE
 RxBIN 610502 RxPCN MEDDAET
 RxGRP# RXAETD
 ISSUER (80840)

MEMBER SINCE 2020
 RX

MedicareRx
 Prescription Drug Coverage

PCP 0 ER 0
 SP 0 HO 0/A
 AS 0

PRINTED ON: CMS- XXXXX XXX

Dental Product

Dental Payer ID

Front

www.aetnamedicare.com

Customer Service:
 Medical and Behavioral Health 1-855-523-6455
 Prescription Drug 1-855-523-6455
 Dental (Member and Provider) 1-866-690-4916
 Medical Provider Line 1-800-624-0756
 TDD/TTY 711

Send medical claims to:
 Aetna Medicare
 PO BOX 981106
 El Paso, TX 79998-1106

Send dental claims to:
 Aetna Medicare
 PO BOX 7762
 London, KY 40742

This card does not guarantee coverage.
 Medical Payer ID# 60054
 Dental Payer ID# 18014
 Medicare limiting charges apply.

7739-06/17

Dental Customer Service

Dental Claims mailing address

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