



To print this ID card, please select the print icon from the tool bar.

TRIM WITH SCISSORS HERE



GRP: 101968-17-001

Issuer (80840) 9140860054

Dental PPO

ID

W2410 94259

NAME

01 S J SHIELDS

www.aetna.com

PAYER NUMBER 60054 0075

You do not have to choose a primary care dentist and referrals are not required.

Note: This card does not guarantee coverage.

Aetna Life Insurance Company

P.O. BOX 14094

LEXINGTON KY 40512-4094

MEMBER SERVICES

1-800-843-3088

Date Printed : January 10, 2018

The above is a facsimile of your actual ID card. You can show this to your health care provider. All limitations that apply to your ID card apply to this facsimile.