

For office use only

Social Security Number:

Employee Enrollment Application **TEXAS**

HumanaDental

Please use black ink and capital letters in each box and fill in each circle where applicable.

Group number (if known)

Benefit number

Dental plan information

If selecting dental coverage other than employee only, complete and attach the Dependent Information form.

Coverage type:

Employee only Employee and spouse Employee and child(ren) Family Other: _____

Plan name

Employee's primary care dentist (DHMO only)

Network name

Current patient? No Yes Facility number

Prior dental coverage

This section must be completed in order for HumanaDental to process any dental claims.

Within the past 12 months, have you had any individual or other group dental coverage? No Yes

Orthodontia coverage? No Yes

Prior dental carrier name

Policy number

Prior carrier phone number

Effective date (MMDDYYYY)

Termination date (MMDDYYYY)

Level of coverage: Employee Employee and spouse Employee and child(ren) Family

Still in effect? No Yes

Waiver (refusal of dental coverage)

I acknowledge that I have been given the opportunity to apply for group dental coverage available to me and my dependents through my employer. I hereby waive dental insurance coverage for (check all that apply):

Myself My spouse My dependent child(ren)

I decline to apply for group dental coverage because of:

- Spousal coverage
- Individual dental coverage
- Dental coverage under another carrier's plan provided by my employer.
- Other: _____

I understand and agree:

- In the event that I should decide to apply for such coverage hereafter, that such subsequent application shall be subject to the applicable terms and conditions of the master group contract(s) or plan provisions as described in the Summary Plan Description which may require additional limitations and waiting periods.
- HumanaDental reserves the right to deny coverage with any future application for coverage.

Humana Insurance Company
HumanaDental Insurance Company
SafeGuard Health Plans, Inc.