The CIGNA Dental Difference
DHMO Provider Nomination Form

If you would like your dentist to join the CIGNA Dental Care (DHMO\(^1\)) network, we encourage you to speak with him/her about us. For more information about CIGNA Dental please have your dentist call us at 1.800.CIGNA24 (1.800.244.6224).

TO BE COMPLETED BY EMPLOYEE

Name: ____________________________

Employer: _________________________

BE COMPLETED BY DENTIST

Name: ____________________________

Street Address: _______________________

City: ________________________________

Telephone: __________________________

Specialty: ___________________________

# of Dentists: (FT): ____________________ (PT): ____________________

# of Hygienists: (FT): ____________________ (PT): ____________________

Please return to:
CIGNA Dental
4616 U.S. Highway 75 South
Denison, TX 75020

Note: CIGNA contacts all nominated dentists in an effort to recruit them into the network. However, we cannot guarantee that they will join the network.

“DHMO” is used to refer to product designs that may differ by state of residence of enrollee, including but not limited to, prepaid plans, managed care plans, and plans with open access features.


08/08 © 2008 CIGNA Dental