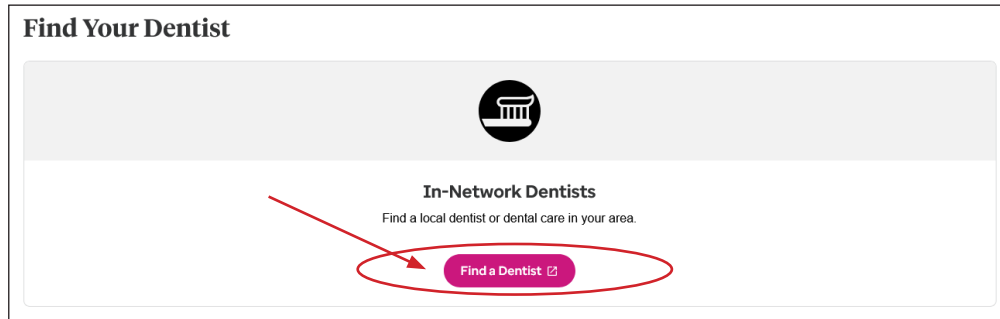


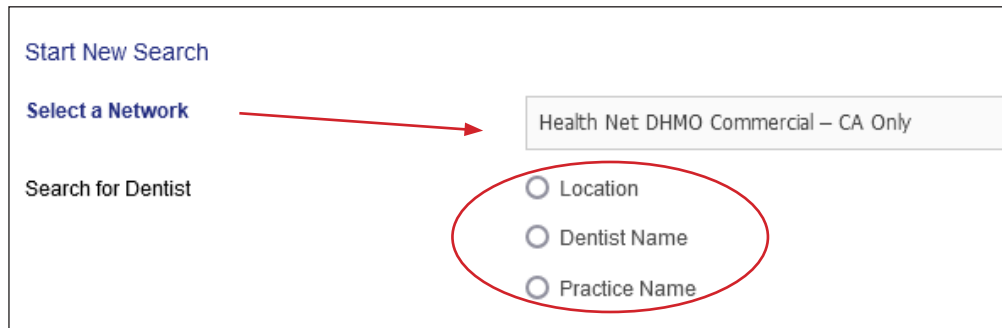


<https://yourdentalportal.com/sbd/dental?brand=healthnet>

1. Scroll down and click on the “Find a Dentist” button.



2. Select a Network from the list below. Then choose to search by Location, Dentist Name, or Practice Name.



Plan/Network (All plans are listed under the Standard Medical Plans):

- **DHMO:** Health Net DHMO Commercial – CA Only
- **PPO:** Health Net PPO Commercial

Member Enrollment Application

When completing the Member Enrollment Application (seen below), if you are choosing a Dental HMO plan, then you will be required to provide the Dental HMO provider name and Dental HMO provider ID.

| 4. Family information, please list all eligible family members to be enrolled. (Attach additional sheets if necessary.) | | | |
|--|------------|---|------|
| Spouse/Domestic partner <input type="checkbox"/> M <input type="checkbox"/> F | Last name: | First name: | MI: |
| Residence address: <input type="checkbox"/> Check here if same as subscriber | | | |
| City: | | State: | ZIP: |
| Date of birth (mm/dd/yyyy): | | Social Security #/TIN/Matricular ID #: | |
| Participating physician group: | | Primary care physician: | |
| PPG/PCP Enrollment ID # (3 or 4-digit PPG and 6-digit PCP numbers): | | Is this your current PCP? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Dental HMO provider name: | | Dental HMO provider ID #: | |