



DENTAL BENEFIT

HHANE is pleased to offer a Dental Benefit to our Members

If you are planning a visit to the Dentist, HHANE will reimburse your out-of-pocket cost up to **\$300.00** annually.

Legible dental **office invoice or statement must show receipt of out-of-pocket payment** to determine the reimbursement benefit amount. This benefit is valid for all visits in 2024.

RECEIPT MUST BE SUBMITTED OR POSTMARKED BY
DECEMBER 31, 2024, TO BE CONSIDERED FOR
REIMBURSEMENT

Paperwork can be given to any Director or mailed to:

HHANE
PO BOX 1811
Plainville, MA 02762

If you have questions, please call the HHANE office at
1-508-316-3364