

This is a temporary card to use for the first 30 days of your plan. After 30 days log into GuardianAnytime.com to register, obtain your permanent card and get an overview of your plan benefits.

Guardian Dental Guard Dental Coverage



PlanHolder:
Commissioners of Henry County

Supply your name and DOB to the provider's office.

Plan Number: 00510096



Vision Service Plan (VSP) Vision Coverage



PlanHolder:
Commissioners of Henry County

Supply your name and DOB to the provider's office.

00510096

Plan Number:



Customer Response Unit: 888-600-1600

Submit Claims to:
Guardian
Group Dental Claims
PO Box 981572
El Paso TX 79998-1572

PROVIDER SELECTION: You are free to decide which provider to use at any time. However, you can generally reduce your out-of-pocket expenses if you use a DentalGuard Preferred PPO Network provider. To find PPO network providers in your area, consult your directory, visit www.GuardianAnytime.com or call the toll-free number. See your benefits booklet for a description of benefits, terms and conditions, limitations and exclusions of coverage. This card is for identification purposes only and does not guarantee eligibility to receive services.

Customer Response Unit: 888-600-1600

Submit Claims to:
Vision Service Plan
PO Box 997105
Sacramento, CA 95899-7105

Using your Benefits:

1. Review your benefit information for coverage details.
2. Choose a VSP network doctor online or by phone 24 hr./day
3. Make an appointment and let them know you're a VSP member

Visit www.GuardianAnytime.com or call the toll-free number.

See your benefits booklet for a description of benefits, terms and conditions, limitations and exclusions of coverage. This card is for identification purposes only and does not guarantee eligibility to receive services.

