Exciting changes coming this October to your Dental and/or Vision insurance coverage!



New partnership with SKYGEN for administrative services

To improve your customer experience, Aflac Dental & Vision is partnering with SKYGEN for administrative services starting in October 2024. This partnership is designed to enhance our service capabilities and ensure you receive the best support possible.

What does this mean for you?

Please note that this transition to SKYGEN as your claims processor does not change your coverage, plan benefits, or premiums in any way.

New member ID numbers
You'll be assigned a new member ID number as part of this transition. Please make a note of this change to ensure seamless service when accessing your benefits.

New member ID cards
Along with your new ID number, you'll receive a brand-new member ID card. Be on the lookout for your updated card in the mail—it's your key to continued access to your dental and vision benefits.

Claims submissions
There are new details your providers will need in order to submit claims. At your next office visit, please present your new ID card to your provider to avoid any issues with claims submissions.
Note: a separate communication has been sent directly to providers informing them of these details.

We are here for you!

Our team is ready to assist you every step of the way. If you have any questions or need help with your new ID number or card, don't hesitate to reach out.
Phone: (855) 819-1873.
Member portal: https://mylogin.aflac.com.

We look forward to continuing to serve your dental and vision insurance needs for many years to come!

Aflac®

Aflac refers to the following companies: American Family Life Assurance Company of Columbus, American Family Life Assurance Company of New York, Continental American Insurance Company, and Continental American Life Insurance Company.
Aflac WWHQ | 1932 Wynnton Road | Columbus, GA 31999. Aflac of New York | 22 Corporate Woods Boulevard, Suite 2 | Albany, New York 12211.
NOTICE: The coverage offered is not a qualified health plan (QHP) under the Patient Protection and Affordable Care Act (ACA) and is not required to satisfy essential health benefits mandates of the ACA. The coverage provides limited benefits.
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